SUMNER COUNTY Health Risk Behaviors

CHEYENI	NE	RAWLINS	DECATUR	NORTON	PHILLIPS	SMITH	JEWELL	REPUBLIC	WASHING TO	N MARSH	IALL NEMA	HA BROW	DON IPH A	Se
SHERMA	AN	THOMAS	SHERIDAN	GRAHAM	ROOKS	OSBORNE	MITCHELL	CLOUD	CLAY	ž	FAWA TOM IE	JACKSON LEF	TCHISON Z	VENNORTH
WALLACE	E L(DG AN	GOVE	TREGO	ELLIS	RUSSELL	LINCOLN	SALINE	DICKINSON	GEARY	WABAUNSE	\ ~	DOUGLAS	WYANDOTT JOHNSON
GREELEY	WICHITA	SCOTT	LANE	NESS	RUSH	BARTON		MCPHERSON	MARION	MORRIS	LYON	OSAGE	FRANKLIN	MIAMI
IAMILTON	KEARNY	FINNEY		HODGEMAN	PAWNEE		RICE	HARVE		CHAS	BE	COFFEY	ANDERSON	LINN
			GRAY	FORD	EDWARDS	STAFFORD	RENO	SEDGU	Вит	TLER	GREENWOOD	WOODSON	ALLEN	BOURBON
STANTON	GRANT	HASKELL	MEADE	Ţ	KIOWA	PRATT	KINGMAN				ELK	WILSON	NEOSHO	CRAWFORD
IORTON	STEVENS	SEWARD	MEAUE	CLARK	COMANCHE	BARBER	HARPER	SUMNER		OWLEY	CHAUTAUQUA	MONTG OME	RY	CHEROKEE

Health Risk Behaviors of Sumner County 2000

State of Kansas Bill Graves, Governor

Kansas Department of Health and Environment Clyde D. Graeber, Secretary

Report Preparation:

EnVisage Consulting
D. Charles Hunt, MPH, Epidemiologist, KDHE
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Kansas Department of Health and Environment Bureau of Health Promotion

June 2001

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The Health Risk Studies Program of the Bureau of Health Promotion (BHP) within the Kansas Department of Health and Environment (KDHE) is part of the Department's ongoing commitment to assess lifestyle-related health risks of Kansans. The health information contained in this report will assist public health leaders in effectively targeting program interventions that decrease the risk of chronic diseases, acute illnesses, injuries, and premature death.

Special recognition is extended to the survey staff who made the Behavioral Risk Factor Survey of Sumner County possible. Their dedication and perseverance resulted in data that are highly representative of health behaviors in the Sumner County population.

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The BHP welcomes comments and suggestions on the content and format of this report and on the data presented. Additional statistics not contained in this report may be available upon request. Please direct all comments, questions, and requests to:

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Text of Survey Questions and Response Freq Text of each question and the weight		es
Risk Factor Tables		5 rs:
Fair or Poor General Health	57	Pain Limited Usual Activities
Lacked Health Care Coverage		Sad, Blue, Depressed
Unable to See a Doctor Due to Cost in Past 12 Mo		Worried, Tense, Anxious 70
Lacked Usual Source of Routine Health Care	58	Not Enough Rest or Sleep 70
Hypertension	59	Not Very Healthy and Full of Energy 71
High Blood Cholesterol		Lacked Eating Fruits and Vegetables 71
Diabetes Mellitus		Chronic Drinking
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14+ Days in Pain Last Month	68	

EXECUTIVE SUMMARY

Health Status	Sumner	KS	US*
Percentage reporting that in general their health was fair or poor	17	13 ^b	13 ^b
Health Care Access			
Percentage reporting no health insurance or other health care coverage	8	9 ^b	12 ^b
Percentage unable to see a doctor due to cost during the past 12 months	10	7 ^b	10 ^b
Percentage lacking a regular health care provider	7	14^{d}	NA
Hypertension			
Percentage ever told by a health professional that they had high blood pressure	31	21 ^b	24^{b}
Cholesterol			
Percentage ever told they had a high cholesterol among those who had ever had their cholesterol checked	34	27 в	30 ^b
Diabetes			
Percentage ever told they had diabetes (except during pregnancy only)	9	5 ^b	6 ^b
Physical Activity			
Percentage not engaging in at least 20 minutes of leisure time physical activity at least three times per week	60	65°	80°
Percentage not engaging in at least 30 minutes of leisure time physical activity five times per week	81	86°	80°
Seatbelt Use			
Percentage who do not always use a seat belt when driving or riding in a car	47	46 ^d	31^d
Percentage of children 0 to 15 years not always restrained when riding in a car	24	23^{d}	15 ^d
Tobacco			
Percentage who currently smoke cigarettes	25	21 ^b	23 b
Percentage of males who use smokeless tobacco	23	10^{d}	7^{d}
Overweight			
Percentage overweight (BMI >= 27.8 for males and >=27.3 for females)	43	33 b	34 ^b
Percentage overweight or obese (BMI >= 25)	63	56 ^b	NA
Percentage obese (BMI >= 30)	26	19 ^b	20 ^b

^a 2000 ^b 1999

^d 1997
^e 1996
^f 1995

* median prevalence NA=Not Available

° 1998

Breast and Cervical Cancer Screening	Sumner	KS	US*
Percentage of women aged 40 and older who have not had a mammogram in the past two years	31	24 ^b	27 ^b
Percentage of women aged 40 and older who have not had a clinical breast exam in the past two years	31	21 ª	NA
Percentage of women aged 40 and over who have not had both a mammogram and a clinical breast exam in the past two years	43	31 b	NA
Percent of women who have had a hysterectomy	31	24 ^b	23 b
Percentage of women with a uterine cervix who have not had a pap smear within the past two years	25	15 ^b	17 ^b
HIV			
Percentage of persons younger than 65 reporting risk of contracting HIV as "medium" or "high"	7	7 ^b	6 b
Activity Limitations and Quality of Life			
Percentage with a limitation in any activities due to any impairment or health problem	17	12 ^b	NA
Percentage with one or more days of the last 30 days where pain made it hard to do usual activities	24	21 ^b	NA
Percentage with 14 or more days of the last 30 which they felt sad, blue, or depressed	10	5 ^b	NA
Percentage with 14 or more days of last 30 days which they felt worried, tense or anxious	19	12 ^b	NA
Percentage with 14 or more days of last 30 days during which they did not get enough sleep	26	22 ^b	NA
Percentage with 14 or more days of last 30 days during which they did not feel very healthy and full of energy	39	23 ^b	NA
Fruits and Vegetables			
Percentage who reported having less than 5 servings of fruits and vegetables per day	71	76°	76°
Alcohol			
Percentage who reported having 60 or more drinks per month	4	3 ^b	4 ^b
Percentage having five or more drinks of alcohol on an occasion, one or more times during the past 30 days.	14	12 ^b	15 b
Percentage who reported having driven when they'd had perhaps too much to drink	3	6 ^b	5 b

^a 2000 ^b 1999 ^c 1998

^d 1997
^e 1996
^f 1995

* median prevalence NA=Not Available

Firearms	Sumner	KS	US*
Percentage keeping a handgun in or around the home	21	NA	NA
Percentage keeping a long gun in or around the home	39	NA	NA
Percentage keeping a firearm in or around the home that is both loaded and unlocked	5	9 ^f	NA
Percentage carrying a loaded firearm outside of the home for protection during the last month	1	2 ^f	NA
Percentage who reported driving or being a passenger in a motor vehicle in which they knew there was a loaded firearm during the last month	3	NA	NA
Percentage who reported confronting someone with a firearm during the last year	0	NA	NA
Violence			
Percentage very or somewhat afraid to leave their home at night	4	12 e	NA
Percentage who witnessed a violent crime in their neighborhood in the last year	3	8 e	NA
Percentage knowing or seeing someone who was beaten or otherwise hurt by a husband, wife, boyfriend or girlfriend in the past year	14	30°	NA
Adult Immunization			
Percentage who have not have not had an influenza vaccine within the past 12 months	63	67 ^b	69 ^b
Percentage ages 65 and over who have not had an influenza vaccine within the past 12 months	26	33 b	33 b
Percentage who have never had a pneumonia vaccine	74	80 b	82 b
Percentage ages 65 and over who have never had a pneumonia vaccine	37	45 b	45 b
Preventive Counseling			
Percentage who have ever had a health professional talk with them about diet or eating habits	37	21 e	NA
Percentage who have ever had a health professional talk with them about physical activity or exercise	40	21 °	NA
Percentage who have ever had a health professional talk with them about injury prevention such as safety belt use, helmet use, or smoke detectors	17	10 e	NA
Parenting			
Percentage of youngest children who watched two or more hours of TV on previous day	51	50 ^b	NA
Percentage of households without rules about program, movie, and video game content	26	33 b	NA

^a 2000 ^b 1999 ^c 1998

* median prevalence NA=Not Available

^d 1997
^e 1996
^f 1995

SURVEY CONTENT

For the complete text of each question and response frequencies, see page 42.

CORE MODULES

Health Status

Self-perceived health

Health Care Access

Insurance coverage

Type of insurance

Length of time without health insurance

Inability to see doctor due to cost

Source for routine care

Time since last check-up

Hypertension Awareness

Last blood pressure check

Diagnosis of high blood pressure

Cholesterol Awareness

Last blood cholesterol check

Diagnosis of high blood cholesterol

Diabetes

Diagnosis of diabetes mellitus

Exercise

Frequency, duration, and type of leisure time exer.

Seat Belt Use

Frequency of use of seat belt

Frequency of use of seat belt by oldest child

Tobacco Use

Current and former smoking status

Number of cigarettes consumed

Quitting for 1+ days during the past 12 months

Elapsed time since quitting

Smokeless Tobacco Use

Prior use of smokeless tobacco

Current use of smokeless tobacco

Demographics

Age

Sex

Race

Hispanic ethnicity

Marital status

Ages of children in the home

Educational attainment

Employment

Income

Height and weight

Zip code

Women's Health

Elapsed time since last mammogram

Reason for last mammogram

Elapsed time since last clinical breast exam

Reason for last clinical breast exam

Elapsed time since last pap smear

Reason for last pap smear

Hysterectomy

Current pregnancy

Immunization

Flu shot during the last 12 months

Lifetime pneumonia shot

HIV/AIDS

Self-perceived risk for acquiring HIV infection

Elapsed time since last blood test for HIV

Reason for last blood test for HIV

Location of last blood test for HIV

Receipt of test results

Quality of Life

Activity limitation

Cause of activity limitation

Duration of activity limitation

Limitation in personal care

Limitation in routine care

Limitation due to pain and frequency of pain

Frequency of feeling sad, blue or depressed

Frequency of feeling worried, tense or anxious

Frequency of insufficient sleep or rest

Frequency of feeling very healthy and full of energy

SUMNER-SELECTED OPTIONAL MODULES

Parenting

Age of oldest child

Relationship between respondent and child

Parent who spends the most time with the child

Oldest child dividing time between households

Duration of television watching by oldest child

Activity shared with oldest child

Family rules

Where oldest child goes after school

Adult supervision after school

Time spent in day care

Health Care Coverage

Reason for not having health care coverage

Preventive Counseling

Elapsed time since received counseling from health professional on diet or eating habits

Elapsed time since received counseling from health professional on physical activity

Elapsed time since received counseling from health professional on injury prevention

Elapsed time since received counseling from health professional on drug abuse

Elapsed time since received counseling from health professional on alcohol use

Elapsed time since health professional advised to quit smoking (smokers)

Elapsed time since health professional discussed reproductive health issues (under age 65)

Fruits and Vegetables

Frequency of fruit and vegetable intake

Alcohol Consumption

Any consumption of alcohol

Frequency and quantity of alcohol consumption

Drinking and driving during the past month

Firearms

Presence of firearms around home

Type of firearms kept

Reason for keeping firearms

Keeping of firearms loaded and unlocked

Carrying of loaded firearm

In a vehicle with a loaded firearm

Use of firearm to confront another person

Attendance at firearm safety training

Ownership of firearms

Violence and Crime

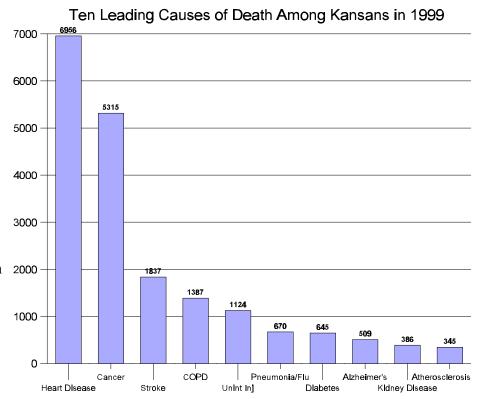
Fear of leaving house at night

Witnessed a violent crime in neighborhood

Known a victim of domestic violence

Introduction

Approximately half of all deaths in the United States can be attributed to just nine factors: tobacco; diet/activity patterns; alcohol; microbial agents; toxic agents; firearms; sexual behavior; motor vehicles; and illicit use of drugs (McGinnis and Foege, 1993). Consequently, making substantial improvements in health outcomes (illness, death, injury, and disability) requires improving health behaviors. Community efforts to improve health depend on measurement of both health outcomes and health behaviors to effectively design and measure the impact of local health intervention efforts.



Health outcomes can be measured

in medical records and vital records, such as birth certificates and death certificates, but measuring the behaviors that have such a profound impact on health requires either observing what people do or asking them what they do. Structured interviewing (i.e., surveying) of large numbers of individuals randomly selected from the population (sampling) has been the most commonly employed and most economical method for measuring behavior.

While national prevalence estimates of health risk behaviors had been available prior to the early 1980's through studies conducted by the National Center for Health Statistics (e.g., National Health and Nutrition Examination Surveys; National Health Interview Survey), these data were not available at the state level. It was recognized that national data may not be applicable to any given state, yet state health agencies have the primary role of targeting resources to reduce behavioral risks and their consequent health outcomes. As telephone survey methodology was gaining wide acceptance as a valid way of measuring health risk behaviors in populations, the Behavioral Risk Factor Surveillance System (BRFSS) was established in 1984 by the Centers for Disease Control and Prevention to provide such state-level data on behavioral health risks and preventive health practices.

The Behavioral Risk Factor Surveillance System, which is coordinated and partially funded by the Centers for Disease Control and Prevention, is the largest continuously-conducted telephone survey in the world. It is conducted in every state, the District of Columbia, and several United States territories. The first BRFSS survey in Kansas was conducted as a point-in-time survey in 1990, and Kansas has conducted the BRFSS survey annually since 1992.

In 2000, the Sumner Community Health Organization entered into an agreement with Kansas Department of Health and Environment (KDHE) for the Health Risk Studies Program within KDHE to conduct a survey based on BRFSS methods in Sumner County. This document summarizes results from that survey.

To give perspective to Sumner County results, we have included selected Healthy Kansans 2000 objectives for comparison. Healthy Kansans 2000 was a process similar to Healthy People 2000 which set health objectives for the state and provided baseline data against which to measure progress achieving the objectives. Many of the objectives in Healthy Kansans were designed to be measured by the BRFSS. The table below lists the objectives from Healthy Kansans 2000 which can be measured using BRFSS data and provides the measures for each objective for Sumner County and Kansas as well as the target Kansas objective.

Selected Healthy Kansans 2000 Objectives	Sumner 2000 Percent	Kansas Percent	Healthy Kansans 2000 Objective
Health Care Access*			
Increase the proportion of adults with health care coverage	92	91 ^a	92
Reduce the proportion of adults not seeking health care due to cost	10	7 ^a	6
Increase the proportion of adults who have a specific source of primary care for their ongoing preventive and episodic health care	93	86ª	95
Increase the proportion of adults who have had their cholesterol checked in the past five years	63	69 a	75
Physical Activity*			
Increase the proportion of adults aged 18 and older engaging in regular physical activity at least 5 times a week for at least 30 minutes	19	17 ^b	40
Decrease the proportion of adults aged 18 and older engaging in no leisure time physical activity	30	38 b	15
Unintentional Injuries and Violence*			
Increase the proportion of adults aged 18 and older who report always wearing their seatbelt.	53	54°	70
Increase the proportion of youth aged 0 through 4 who always ride in a safety seat.	#	95°	95
Tobacco*			
Decrease prevalence of current smoking among adults aged 18 and older	25	21 ª	15
Decrease prevalence of smokeless tobacco use by males aged 18 and older	23	10°	4

Selected Healthy Kansans 2000 Objectives	Sumner 2000 Percent	Kansas Percent	Healthy Kansans 2000 Objective
Nutrition*			
Decrease the proportion of adults aged 18 and older who are overweight	43	30 a	20
Increase the proportion of adults who consume five or more daily servings of vegetables (including legumes) and fruits	29	24 ^b	35
Cancer*			
Increase the proportion of women aged 40 and older who have received a mammogram and a clinical breast exam within the last 2 years	57	69 a	60
Increase the proportion of women aged 18 and older without a prior hysterectomy who have ever received a Pap test	95	95 ª	98
Increase the proportion of women aged 18 and older without a prior hysterectomy who have received a Pap test in the past 2 years	75	85 ^a	90
Infectious Diseases and Immunizations*			
Increase the proportion of non-institutionalized adults aged 65 and older who have ever been vaccinated for pneumonia	63	55 a	80
Increase the proportion of non-institutionalized adults aged 65 and older who have been vaccinated for influenza the past 12 months	74	67 ª	80

^{*} Subtitles correspond to Healthy Kansans 2000 health issues and disease risk factors rather than BRFSS survey sections.

Reference

McGinnis, J.M. & Foege, W.H. (1993). Actual causes of death in the United States. Journal of the American Medical Association, 270, 2207-2212.

[#] Estimate not reported due to small sample size.

a 1999

^b 1998

c 1997

Lacked Health Care

Coverage: Respondents who reported that they lacked any form of health care coverage, including health insurance, Health Maintenance Organizations (HMO), Medicare, Medicaid, or military insurance plans.

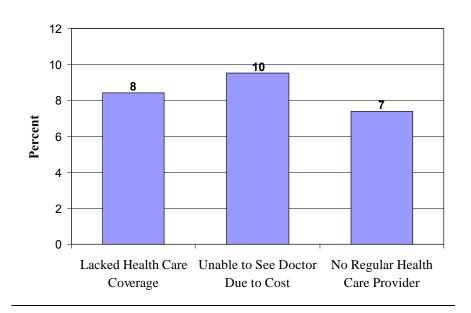
Unable to See a Doctor Due

to Cost: Respondents who reported that they were unable to see a doctor due to the cost during the past twelve months.

Lacked Regular Health Care

Provider: Respondents who reported that they did not have at least one doctor or health professional that they saw for their routine medical care.

Access to Health Care Risk Factors



HEALTH CARE ACCESS AND INSURANCE COVERAGE

Background

Access: Timely use of personal health services to achieve the best possible health outcomes.

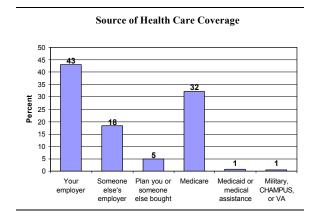
Three risk factors:

- Lack of health care coverage (i.e., insurance)
- Unable to see a doctor due to cost
- No regular health care provider

In its study of access to health care in America, the Institute of Medicine (IOM) panel defined access as the timely use of personal health services to achieve the best possible health outcomes. The panel suggested that the test of equity of access involved determining whether or not there were systematic differences in use and outcomes among different groups, and, if so, identifying whether or not there were barriers that supported a differential access to care. In addition to the poor, other populations identified as potentially having reduced access to care included racial and ethnic minorities, rural residents and persons with a disability.

The percentage of the population with health insurance is one measure of access to care; however, even those persons who have insurance may have only hospitalization coverage, may have high deductibles, or may be unable to afford medications prescribed. A second indicator, being unable to see a doctor due to cost, attempts to measure provider visits actually foregone due to financial access barriers. Usual source of care is measured by the third indicator. Having a usual source of provider care appears to influence health care seeking behavior and has been shown to increase the likelihood that a person will access preventive care services.

Source of coverage Among those with health care coverage, an employer was the most common source of coverage; 61% have coverage through their employer or someone else's employer. Medicare was also a common source of coverage (32% of the respondents). Relatively few of the respondents (5%) reported coverage through a plan they or someone else bought on their own.



Second source

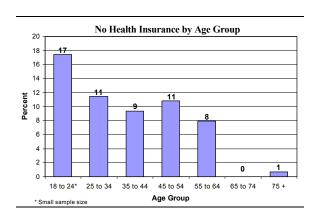
Among those with health care coverage, 31% reported a second source of coverage. This was most common in the older age groups.

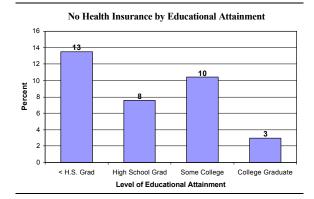
Lack of Health **Care Coverage**

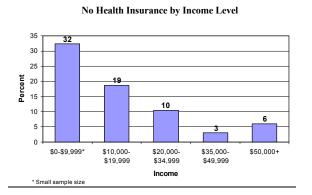
Eight percent of Sumner County respondents reported not having insurance at the time of the survey; this is comparable to 9% reporting no health care coverage for Kansas (1999 BRFSS). Thirteen percent of Sumner County respondents reported being without health care coverage at some time during the past year (including those without insurance at the time of the survey).

Who?

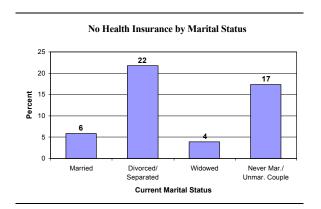
In general, rates of health care coverage increased with age, income, and educational attainment. Highest rates of health care coverage were found among respondents age 65 and older, college graduates, and those with higher incomes. Respondents in the lowest income group reported the lowest health care coverage rates.

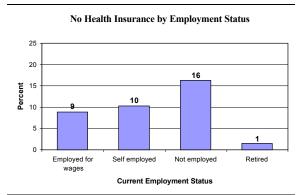






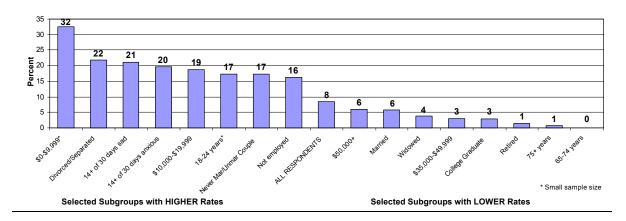
Who? (cont.) Respondents who were divorced, separated, or unmarried were more likely to be uninsured, as were unemployed respondents.



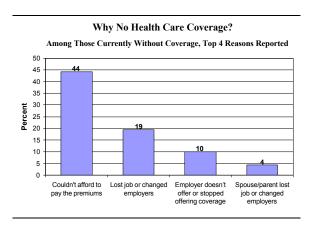


Respondents who were lower income, divorced/separated, sad/blue/depressed 14 or more days last month, and worried/tense/anxious 14 or more days per month reported some of the highest rates of being uninsured.





Why? The most commonly reported reason for not having insurance at the time of the survey was "couldn't afford to pay the premiums" (44%). The other three of the top four reasons related to employer issues.

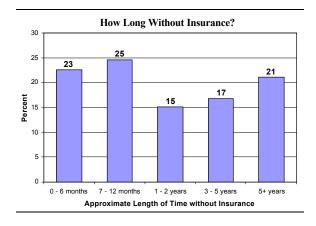


For How Long?

For a slight majority without health insurance at the time of the survey, the problem was of relatively long duration; 53% reported being uninsured for more than a year.

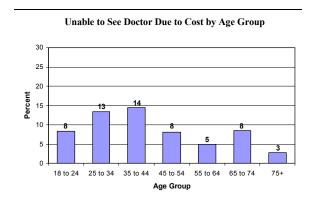
Unable to See a Doctor Due to Cost

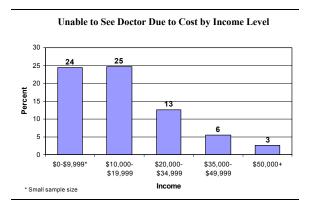
Ten percent of respondents reported that they needed to see a doctor sometime in the past 12 months, but were unable to because of cost. Among those without health insurance, 32%



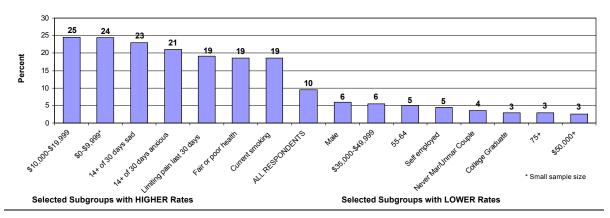
were unable to see a doctor because of cost during the past year.

Inability to see a doctor due to cost generally decreased with increasing age, income, and level of educational attainment. Female respondents were twice as likely as male respondents to report being unable to see a doctor due to cost (13% versus 6%). Persons who were divorced/separated or unemployed were among other population subgroups who reported higher than average rates of being unable to see a doctor due to cost.





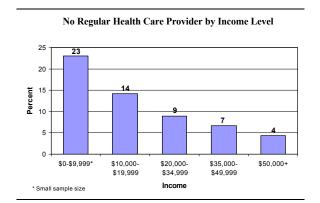
Unable to See Doctor Due to Cost by Selected Population Subgroups

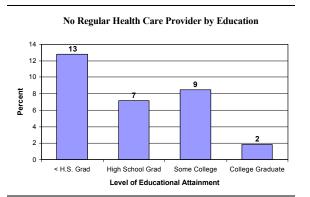


No Regular Health Care Provider

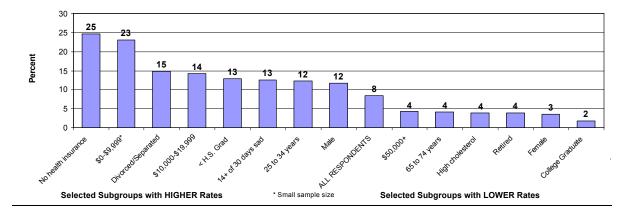
Seven percent of respondents reported that they did not have a particular doctor or health professional to whom they usually went for routine medical care; 25% of those without health insurance did not have a regular health care provider.

Male respondents were four times as likely as female respondents to *not* have a particular health professional to whom they usually went. Having a regular health care provider seemed to be associated with higher income and levels of educational attainment and not as strongly associated with age or employment status.





No Regular Health Care Provider by Selected Population Subgroups



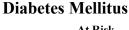
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Health and Human Services. (2000). The initiative to eliminate racial and ethnic disparities in health. Available at http://raceandhealth.hhs.gov/.

Diabetes Mellitus: Respondents ever told by a doctor that they had diabetes, excluding diabetes limited to pregnancy only.





DIABETES MELLITUS

Background

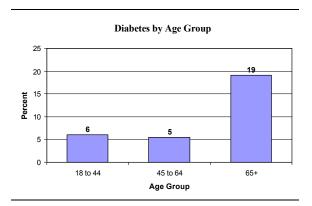
Type 2 diabetes (non-insulindependent) usually occurs after age 40 and accounts for 90-95% of the cases of diabetes. Diabetes mellitus, affecting some 15.7 million people in the United States, is a chronic disease characterized by high levels of glucose (sugar) in the blood as a result of the body's inability to secrete and/or use insulin. Insulin is a hormone produced by the pancreas which helps convert blood glucose into energy. In 1996, diabetes directly caused or contributed to 1771 deaths among Kansans. Diabetes is a serious chronic disease which can cause or contribute to major complications including heart disease, stroke, blindness, kidney disease, nerve disease, lower limb amputations, dental disease, pregnancy complications, and metabolic complications. Diabetes was associated with 127 new cases of blindness, 592 lower extremity amputations, and 229 new cases of end-stage renal disease among Kansans in 1996¹. Diabetes is classified into two main types: type 1 (insulin-dependent), which usually begins during childhood or adolescence; and type 2 (non-insulin-dependent) which usually occurs after age 40 and affects 90-95% of those with diabetes.

Risk factors for type 2 diabetes include obesity, advancing age, lack of physical activity, and high fat diet.

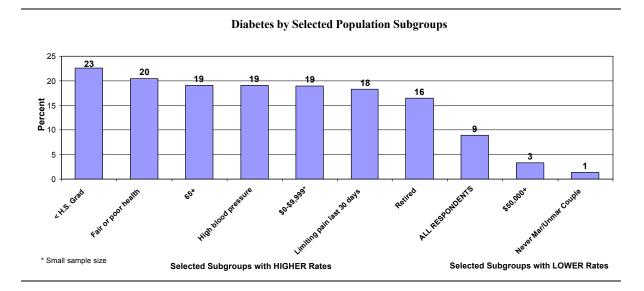
Genetics appears to be the most important risk factor. Significant risk factors for diabetes type 2 are obesity and advancing age. Other factors which may contribute to type 2 diabetes are lack of physical activity and high fat diet. Public health efforts are targeted to monitoring and improving the quality of medical care and self care for persons with diabetes. These secondary prevention strategies are designed to reduce the incidence of diabetes-related complications.

Who's At Risk in Sumner County

Nine percent of respondents reported they had ever been told by a doctor that they had diabetes (excluding those only told during pregnancy). This is higher than the percentage of 5% observed in Kansas. Although the sample size was too small to demonstrate many significant variations among the subpopulations, risk clearly increased with age.



Other risk factors which appeared to be associated with diabetes in Sumner County included fair or poor health, high blood pressure, and limiting pain in the last 30 days.



Reference

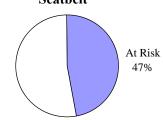
¹Centers for Disease Control and Prevention. (1999). The Burden of Diabetes in Kansas (state fact sheet). Atlanta, GA.

Failed to Always Use Safety Belt:

Respondents who reported they do not "always" use a seatbelt when they drive or ride in a car.

Child Aged 0 to 15 Years Failed to Always Use Safety Belt: Oldest child between the ages of 0 to 15 was not "always" restrained in a car safety seat (ages 0 to 4) or a seat belt (ages 5 to 15).

Adults Failed to Always Use Seatbelt



Children Failed to Always



SAFETY BELT USE

Background

Many injuries are not "accidents"; rather, most injuries are preventable. Widespread human damage is too often taken for granted in the erroneous belief that injuries happen by chance and are the result of unpreventable "accidents." In fact, many injuries are not "accidents," of random, uncontrollable acts of fate; rather, most injuries are predictable and preventable.

U.S. Department of Health and Human Services. (2000). Healthy People 2010, Conference Edition.

31% of children aged 0 to 3 involved in Kansas traffic accidents from 1995 to 1998 were not properly restrained in a child safety seat.

62% of persons killed in Kansas traffic accidents (1990-1998) were not wearing safety belts.

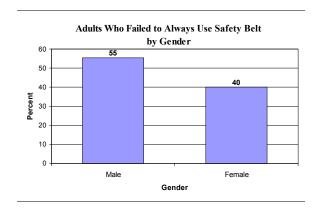
Unintentional injuries are the leading cause of death in Kansas for persons aged 1 to 44. Motor vehicle crashes are the leading cause of unintentional injury death, accounting for approximately half of the deaths due to unintentional injury. Each year, over 500 persons are killed ¹ and over 30,000 people are injured ² in motor vehicle crashes in Kansas. It has been estimated that the proper use of safety belts by adults can significantly reduce the risk of death in a motor vehicle crash ³, and the correct use of a child safety seat can reduce the risk of death for children ⁴.

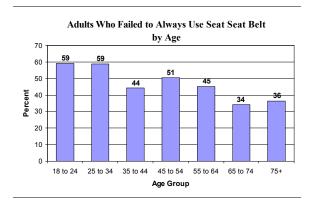
During 1995-1998, 16% of persons involved in Kansas motor vehicle crashes were not wearing safety equipment; 31% of children under age 4 involved in accidents were not properly restrained in a child safety seat ⁵. Among those involved in motor vehicle crashes, those *without* safety equipment were much more likely to be injured than those *with* safety equipment (33% versus 14%) ⁵. Sixty-two percent of persons killed in Kansas traffic accidents (1990 to 1998) were not wearing safety belts ².

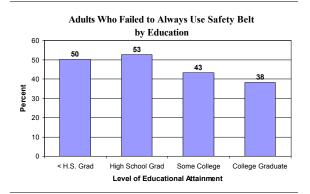
Adults at Risk

Forty-seven percent of respondents in Sumner County reported that they did not "always" use a safety belt when riding or driving in a car. This is comparable with the percentage reported statewide (46% in 1997), but Kansas is much higher than the U.S. median prevalence (31% in 1997).

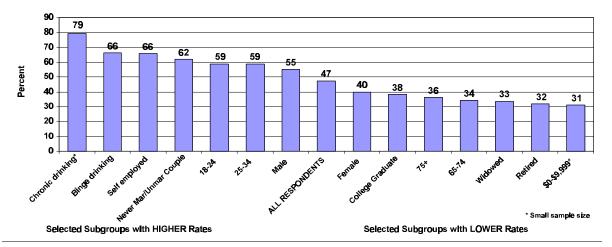
Risk prevalence decreased with increasing age and education level. Males were more at risk than females. Other factors which appeared to be associated with not always wearing a safety belt included chronic drinking, binge drinking, being self-employed, and having never married or being part of an unmarried couple.





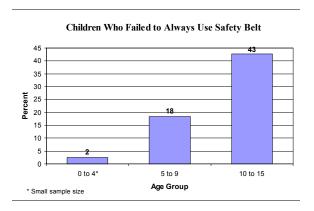


Adults Who Failed to Always Use Safety Belt by Selected Population Subgroups



Children at Risk

Twenty-four percent of children in Sumner County aged 0 to 15 were reported to not always be restrained with a safety seat or seat belt while riding in a car. This is comparable to 23% observed statewide (1997), but higher than the median U.S. prevalence of 15% (1997). Risk increased with the age of the child. The sample sizes were relatively small, and statistically



significant variation was not observed across education of adult respondent, household income, or marital status of the adult respondent.

References

¹ Kansas Department of Health and Environment, Office of Health Care Information. (2001). *1999 Annual Summary of Vital Statistics*.

² Kansas Department of Department of Transportation, Kansas Accident Records System. (1990-1998).

³ Final Rule, FMVSS 208: occupant crash protection, 49 CFR, part 451. Washington D.C.: National Highway Traffic Safety Administration, 1984.

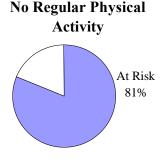
⁴ Kahane CJ. An Evaluation of Child Passenger Safety. The Effectiveness and Benefits of Safety Seats (summary). Washington, D.C.: National Highway Traffic Administration, 1986; DOT publication no. (DOT HS) 806-889.

⁵ Kansas Department of Health and Environment, Office of Local and Rural Health. (2001). *Kansas County Health Profile*.

Sedentary Lifestyle: Persons who do not engage in leisure time physical activity at least three times a week for at least 20 minutes each time.

No Regular Physical Activity: Persons who do not engage in leisure time physical activity at least five times a week for at least 30 minutes each time.





PHYSICAL ACTIVITY

Background

Most of the health benefits of physical activity can be achieved with relatively small amounts of activity integrated into the daily routine. Although underestimated by the public as a health risk, physical inactivity was targeted as one of only four risk behaviors by Healthy Kansans 2000 for statewide improvement. Physical activity improves muscular strength, endurance, flexibility, and cardiovascular health, and delays the onset of physical disability associated with aging. Caloric expenditure associated with physical activity is an important component of weight control. Physical activity has been clearly shown to reduce the risk of premature death and decrease the incidence or impact of a variety of conditions including hypertension, colon cancer, diabetes mellitus, depression, and heart disease. While the benefit associated with physical activity increases with increasing frequency and intensity of activity, most of the health benefits can be achieved with relatively small amounts of activity integrated into the daily routine. Current recommendations suggest that every person should engage in at least 30 minutes of physical activity five to seven days per week (although lesser amounts of activity are beneficial compared to no activity). The activity need not be vigorous (e.g., brisk walking, raking leaves, or gardening have been shown to be beneficial), and need not be done all at once (e.g., three ten minute periods of physical activity is an acceptable alternative to a single activity period of 30 minutes)¹.

Risk Factors:

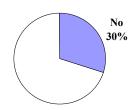
- Irregular physical activity (failing to obtain the recommended level)
- Sedentary lifestyle (failing to obtain the minimum level)

Physical activity is difficult to measure. For many persons, the type, frequency, pattern and intensity of their physical activity varies markedly from day to day. The data profiled in this chapter uses self-reported duration and frequency of leisure time physical activity to assess each respondent's level of physical activity; the method requires respondents to provide an average estimate of their physical activity level over the preceding one month period. The data does not account for physical activity associated with employment. Two threshold indicators of physical activity risk are provided which measure (1) the percentage of the population at risk for irregular physical activity (failing to obtain the recommended level of activity – at least 30 minutes, 5 times per week), and (2) the percentage of the population that is sedentary (failing to obtain at least 20 minutes of activity, three times per week).

Physical Activity in Sumner County

Thirty percent of respondents participated in *no* leisure time physical activity in the past month. This is slightly less than the 38% observed statewide in 1996 but well above the 15% Healthy Kansans 2000 objective. Among those who did participate in a physical activity, these were the most common activities: walking, gardening, aerobics class, bicycling, and golf.

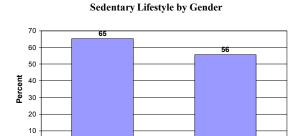
During the past month, did you participate in any physical activity or exercise?



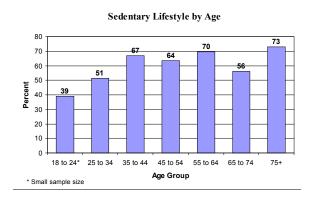
Female

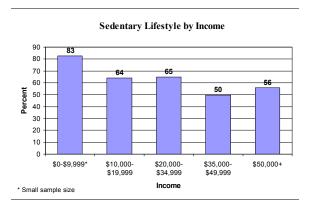
Sedentary Lifestyle

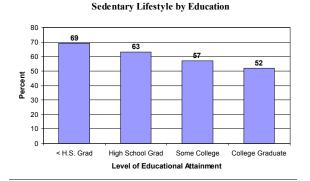
Sixty percent of Sumner County respondents were at risk for a sedentary lifestyle. This is slightly less than the percentage observed statewide in 1998 (65% in 1998). Males appeared more likely than females to be sedentary. Risk of sedentary lifestyle tended to generally increase with age and decreasing income and education level. Divorced or separated respondents tended to have a higher sedentary lifestyle risk than married respondents.

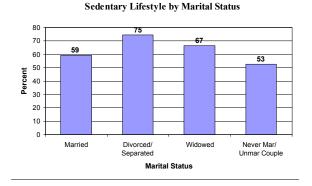


Male



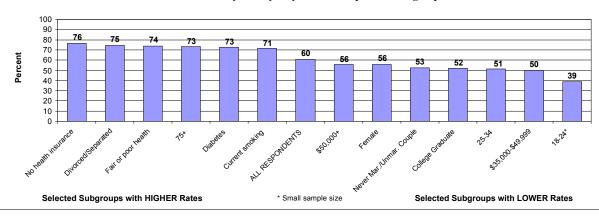






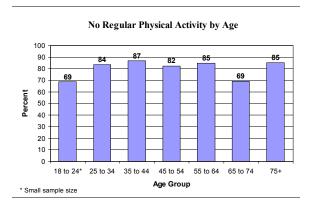
Other subpopulations who appeared to have a higher-than-average sedentary lifestyle included persons who were worried, tense or anxious for 14 or more of the last 30 days, persons at risk for depression (sad, blue, or depressed for 14 or more of last 30 days), persons in fair or poor health, and those without health insurance.

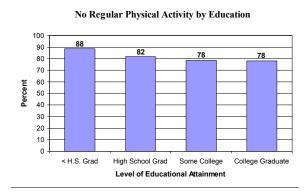


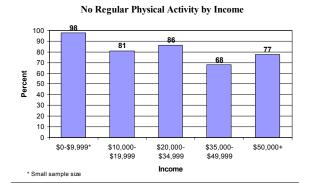


No Regular Physical Activity

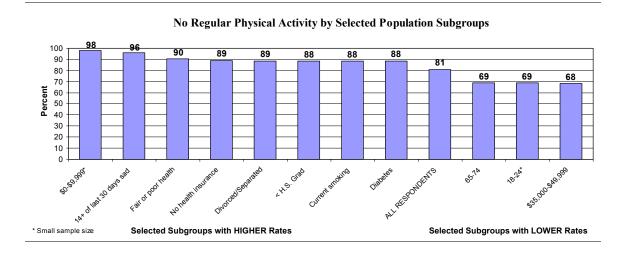
Over 80% of respondents were at risk for no regular physical activity (81%). This compares to 83% observed statewide in 1998. Both the state and Sumner County percentage are well above the Healthy Kansans 2000 objective of 60%. Risk for irregular physical activity varied across age groups. Observed risk generally decreased with increasing education and household income.







Other groups with higher than average risk prevalence included sad, blue or depressed for 14 or more of the last 30 days, fair or poor health, no health insurance, divorced or separated, and current smoking.



Reference

¹U.S. Department of Health and Human Services. (1996). <u>Physical activity and health: a report of the surgeon general</u>. (DHHS Publication No. 017-023-00196-5). Atlanta, GA: U.S. Department of Health and Human Services, Center for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion.

Lacked Recent Mammogram:

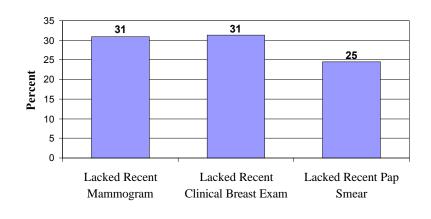
Female respondents aged 40 and older who reported not having had a mammogram within the past two years.

Lacked Recent Clinical Breast

Exam: Female respondents who reported not having had a recent clinical breast exam (within the past three years for women aged 20-39; within the past two years for women aged 40 and older).

Lacked Recent Pap Smear: Female respondents with a uterine cervix who reported not having had a Pap smear within the past two years.

Womens Health Risk Factors



WOMEN'S HEALTH

Breast Cancer Background

Early detection offers women the best chance of surviving the cancer.

According to the American Cancer Society, breast cancer is the most common cancer among women, other than skin cancer. In Kansas, more than 1,700 women are diagnosed with breast cancer annually; nearly 400 women die of breast cancer each year. Breast cancer is relatively uncommon before age 40, but increases rapidly with advancing age. Known risk factors for breast cancer include family history and a variety of hormonal factors; however, the underlying cause of most breast cancers is unknown. Preventing breast cancer is not possible at this time.

However, preventing deaths from breast cancer is possible. Breast cancer can be effectively treated if the cancer is detected early; consequently, early detection offers women the best chance of surviving the cancer. Approximately 95% of women whose cancer is found when small (less than ½ inch) and localized to the breast can be expected to be alive five years later. Since a cancer must be found early if the woman's life is to be saved, it is important that women be screened regularly. Detection of small tumors is only possible through use of screening mammography since tumors less than one-half inch typically cannot be identified by touch. While the risks versus the benefits of mammography for women under age 50 remain controversial, it is generally accepted that mammography is beneficial for women aged 50 to 69 years. The risk factors used to measure breast cancer screening were Lacked Recent Mammogram, and Lacked Recent Clinical Breast Exam.

Cervical Cancer Background

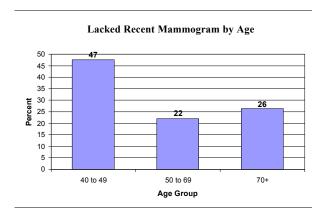
In 1997, 123 Kansas women were diagnosed with cervical cancer and 43 Kansas women died. Risk factors for cervical cancer include a history of multiple sex partners, early age at first intercourse (17 years and younger), a history of sexually transmitted diseases, including human papilloma virus types 16 and 18, and cigarette smoking. In addition to the reduction of behaviors that increase the risk of cervical cancer, early detection and treatment (secondary prevention) remain an important

Some researchers have estimated that the full use of the Pap test could prevent between 37% and 60% of cervical cancer deaths.

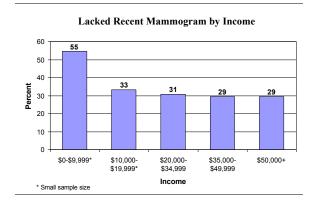
pubic health strategy. The Pap test, which involves examining under a microscope cells that are scraped from a woman's cervix for abnormality, is the principle screening test for cervical cancer. Not only can Pap smears reliably detect cancer at an early treatable stage, they can detect abnormal cervical cells which have the potential to become cancerous in the future. Although death rates are relatively low, the deaths which do occur should be considered potentially preventable. Furthermore, the frequency with which pre-malignant cellular changes are detected by Pap smears ensures death rates will rise without continued aggressive screening and treatment. Some researchers have estimated that the full use of the Pap test could prevent between 37% and 60% of cervical cancer deaths. Lacked Recent Pap Smear is the risk factor used to measure cervical cancer.

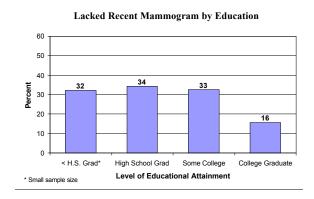
Mammogram

Thirty-eight percent of women of all ages reported never having had a mammogram. Thirty-one percent of female respondents aged 40 and older reported not having had a mammogram within the past two years. This was higher than the 24% reported statewide in 1999. Among age groups, the risk prevalence for lack of a mammogram was highest among persons 40 to 49 years old.

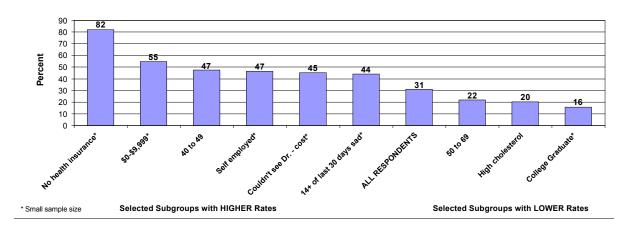


Risk tended to decrease as household income increased, and was lower among those with a college degree than those without a college education.



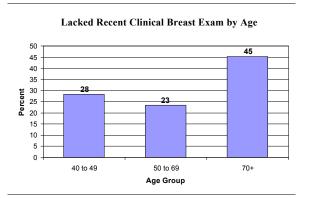


Lacked Recent Mammogram by Selected Population Subgroups

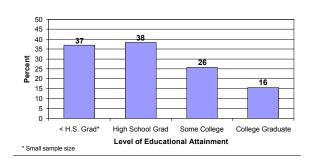


Clinical Breast Exam

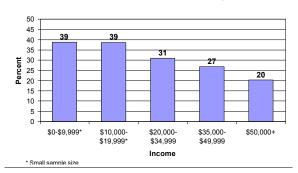
Nineteen percent of female respondents reported never having had a clinical breast exam. Thirty-one percent of female respondents aged 40 and older reported not having had a clinical breast exam within the past two years. Among women aged 40 and older, the risk was highest among respondents aged 70 and older. Observed risk for lack of recent clinical breast exam tended to decrease with increasing household income and educational attainment.



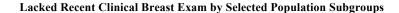


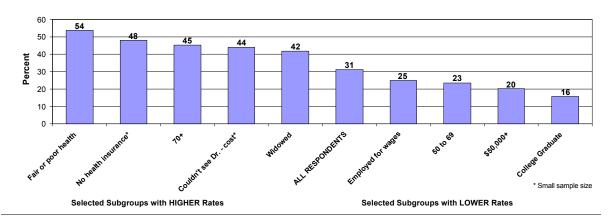


Lacked Recent Clinical Breast Exam by Income



One of the highest risk percentages was observed among those with self-reported health of fair or poor; 54% of female respondents age 40 and over with fair or poor health have not had a clinical breast exam in the last two years.





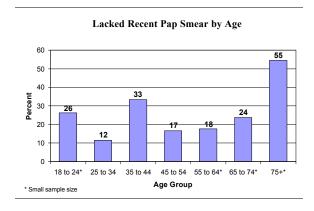
Forty-three percent of women age 40 and over reported lacking a recent clinical breast exam, a recent mammogram, or both. This compares to 31% observed statewide in 1999.

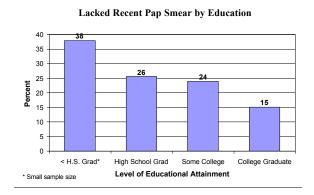
Pap Smear

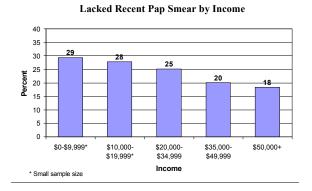
Twenty-five percent of women with a uterine cervix (i.e., no hysterectomy) reported not having had a Pap smear in the past two years. This is higher than the 15% observed statewide in 1999. As an aside, thirty-one percent of female respondents age 18 and older reported having had a hysterectomy. Well over 40% of women aged 40 and over reported having had a hysterectomy.

The percentage at risk varied across the age groups, with women aged 35 to 44 and women aged 75 and older reporting the highest risk prevalence.

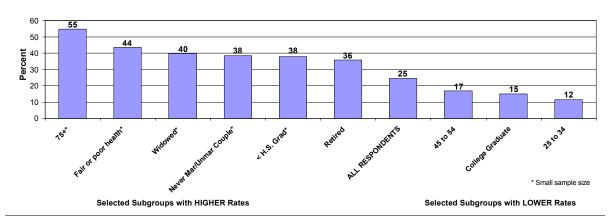
Observed risk decreased with increasing income and education, though neither decrease was statistically significant with the relatively small sample sizes available.







Lacked Recent Pap Smear by Selected Population Subgroups



References

American Cancer Society (1999a). Breast cancer – overview [On-line]. Available: http://www3.cancer.org/cancerinfo/documents/overviews/breaover.asp?ct=5

Brownson, R.C., Reif, J.S., Alvanja, M. C.R., & Bal, D. G. (1998) Cancer. In R. C. Brownson, P. L. Remington & J. R. Davis (Eds.), <u>Chronic disease epidemiology and control.</u> (pp. 335-373). Washington, DC: American Public Health Association.

United States Preventive Services Task Force (1996). <u>Guide to clinical preventive services</u> (2nd ed.). Baltimore, MD: Williams & Wilkins.

Ries LAG, Kosary CL, Hankey BF, et.al.(eds.) (1999). <u>Seer Cancer Statistics</u> <u>Review, 1973-1996.</u> Bethesda, MD: National Cancer Institute. NIH Pub. No. 99-2789.

Lai SM. (1998) <u>Cancer Incidence and Mortality in Kansas, 1997</u>. Kansas City, KS: Kansas Cancer Registry.

Any Activity Limitation:

Respondents who reported that they had any limitation in any activities due to any impairment or health problem.

Pain Limited Usual Activity:

Respondents who reported one or more days in the past 30 where they had pain that limited their activity.

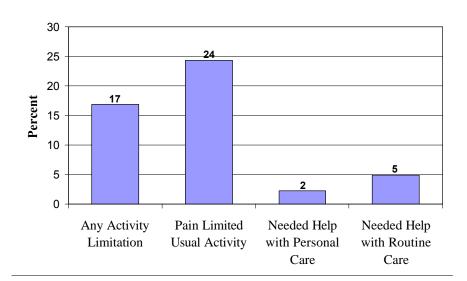
Needed Help With Personal

Care Needs: Respondents reporting that they need the help of other persons in handling personal care needs, such as eating, bathing, dressing, or getting around the house.

Needed Help With Routine

Care Needs: Respondents reporting that they need the help of other persons in handling routine needs, such as everyday household chores, shopping, and doing necessary business.

Disability Risk Factors



DISABILITY

Background

Activity limitations refer to a person's inability to perform activities such as, but not limited to, work, school, recreation, or various activities of daily living such as eating, dressing, cleaning, or shopping.

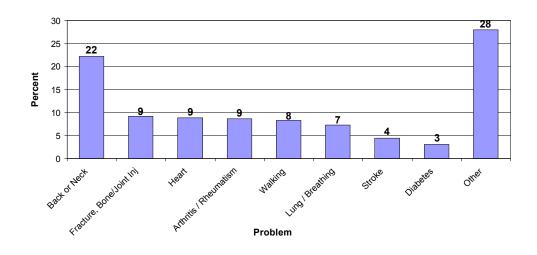
More than 54 million Americans experience some limitation in their activities as a result of an acute or chronic health problem. Activity limitation refers to a person's inability to perform activities such as, but not limited to, work, school, recreation, or various activities of daily living such as eating, dressing, cleaning, or shopping. The prevalence of activity limitations or disability will likely increase by about 50% by the year 2010 due to improved survival of persons with chronic health problems and increased numbers of persons over age 65 ¹. Because disabilities are long-term impairments caused by injuries, congenital anomalies, and chronic diseases, preventing injuries, congenital anomalies and chronic diseases should be the first priority of community health improvement efforts. Preventing the complications of chronic impairments and improving the functional capabilities and quality of life of persons with disabilities offers substantial health benefits to community members.

The four risk factors chosen as indicators of activity limitations or disability are any activity limitation, pain limited usual activity, needed help with personal care, and needed help with routine care. Persons with severe routine and personal care limitations are at greater risk of being institutionalized, especially when there is an absence of a spouse or other family member to help with health and maintenance needs.

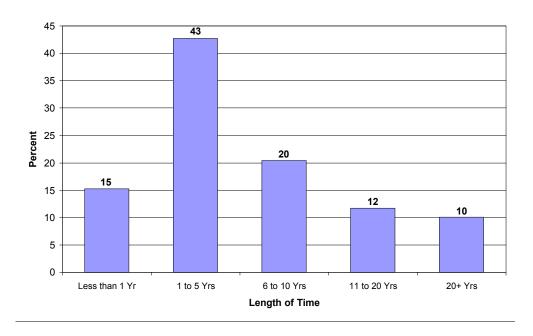
Any Activity Limitation

Seventeen percent of respondents reported a limitation due to an impairment or health problem. This is slightly higher than the 12% observed statewide in 1999. Of those with activity limitations, 22% reported that their major impairment was a back or neck problem. Eighty-five percent of those with limitations have had them for one or more years.

What is the major impairment or health problem that limits your activities?

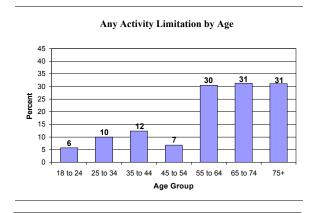


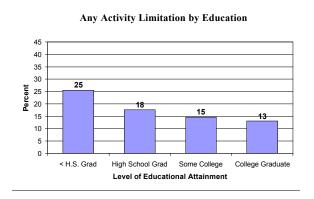
For how long have your activities been limited because of your major impairment or health problem?

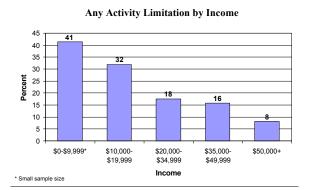


Who?

Respondents over age 55 were more likely to report an activity limitation than those under age 55. Observed risk decreased with increasing education and income. Among employment subcategories, those who were employed for wages reported the lowest risk prevalence for activity limitation.



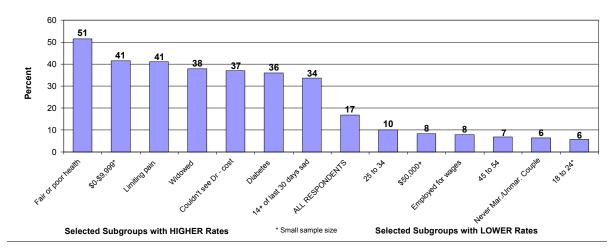






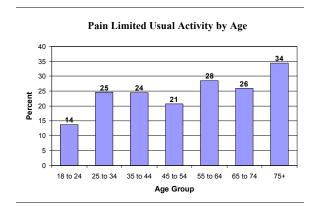
Those respondents who reported being in fair or poor health, being sad/depressed for 14 or more of the last 30 days, that they had any limiting pain, or that they couldn't see a doctor due to cost were more likely to have an activity limitation due to any impairment or health problem.

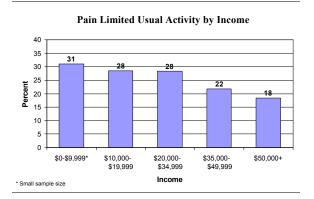
Any Activity Limitation by Population Subgroups



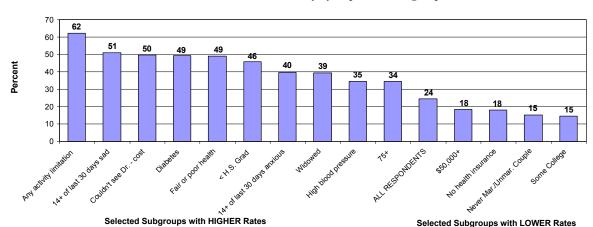
Pain Limited Usual Activity

Twenty-four percent of respondents reported having one or more days in the past month where pain limited their usual activities, such as self-care, work, or recreation. This is comparable to the 21% observed statewide in 1999. Observed risk for limiting pain varied by age group, and generally decreased with increasing income.





Other risk factors which appeared to be associated with limiting pain included any activity limitation, sad/blue/depressed for 14 or more of the last 30 days, unable to see a doctor due to cost, and fair or poor health.



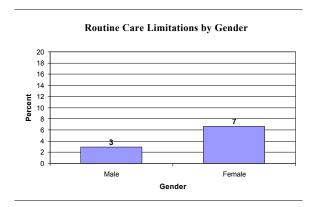
Pain Limited Usual Activity by Population Subgroups

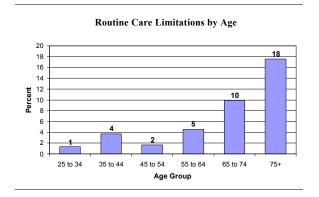
Personal and Routine Care Limitations

Two percent of respondents reported that they needed help with personal care needs (such as eating, bathing, dressing, or getting around the house) due to an impairment or health problem. Although the reported prevalence was generally higher among older age groups, females, and lower income levels, sample sizes were too small to result in statistically significant differences between most population subgroups.

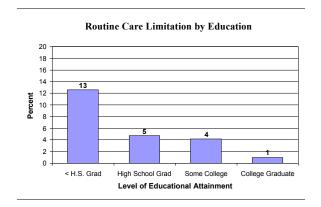
Five percent of respondents reported that they needed help with routine needs (such as everyday household chores, doing necessary business, shopping or getting around for other purposes) due to an impairment or health problem.

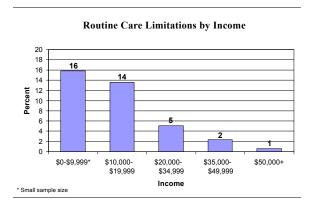
Females were more likely to report routine limitations than males, and reported risk for routine care limitations increased with increasing age.





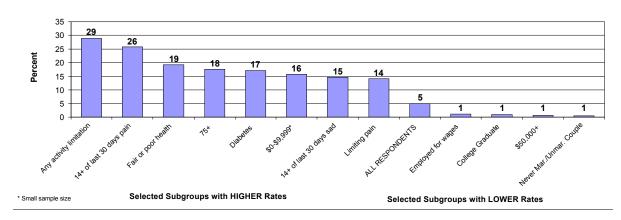
Observed risk for routine limitations decreased with increasing education and income. Among marital status population subgroups, widowed respondents were more likely to report routine limitations, and among employment population subgroups, retired respondents were more likely to report that a health problem or impairment limited their routine activities.





Other population subgroups which reported higher-than-average routine limitations included those with any activity limitation, 14 or more days out of the last 30 in pain, self-reported fair or poor health, and diabetes.

Routine Care Limitations by Population Subgroups



References

Centers for Disease Control and Prevention. (1999). Disability and Health Branch [On-line]. Available: http://www.cdc.gov/nceh/programs/cddh/dh/scabout.htm

Sad, Blue, or Depressed:

Respondents who reported they felt sad, blue, or depressed for 14 or more days during the past 30 days.

Worried, Tense, or Anxious:

Respondents who reported they felt worried, tense, or anxious for 14 or more days during the past 30 days.

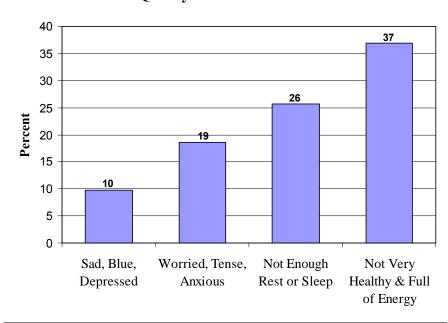
Not Enough Rest or Sleep:

Respondents who reported they did not get enough rest or sleep for 14 or more days during the past 30 days.

Not Very Healthy and Full of

Energy: Respondents who reported they did not feel very healthy and full of energy for 14 or more days during the past 30 days.

Quality of Life Risk Factors



MENTAL HEALTH AND QUALITY OF LIFE

Background

Estimates indicate that one in seven women and one in thirteen men will be affected by depression at some point in their life.

Four of the ten leading causes of disability for persons age 5 and older are mental disorders.

Mental health is the successful performance of mental function which results in a productive and fulfilling life from childhood through late life. Mental illness refers collectively to all mental disorders which are health conditions characterized by alterations in thinking, mood, or behavior (or some combination thereof) and which are associated with distress or impaired functioning ¹. Mental disorders include illness such as depression, anxiety disorders, and schizophrenic disorders. Depression is characterized by prolonged and unrelenting sadness, loss of interest in activities, fatigue, changes in eating or sleeping patterns, feelings of worthlessness, impaired concentration and thoughts of death or suicide. More people are affected by mental illness than is commonly thought. Estimates indicate that one in seven women and one in thirteen men will be affected by depression at some point in their life, while anxiety disorders, including panic disorders, posttraumatic stress disorder, obsessive compulsive disorder and phobias, affect an estimated 16 million Americans ².

Mental illness has a large impact on health. The 1999 Surgeon General's report on mental health highlights findings from the *Global Burden of Disease* study which shows that four of the ten leading causes of disability for persons 5 years of age and older are mental disorders ². The report also notes that together all mental illnesses are the second leading cause of disability-adjusted life years next to all cardio-vascular conditions. (Disability-adjusted years are years of life lost to premature death and years lived with a disability of specified severity and duration). The report states that the impact of mental illness on health and productivity is markedly under-recognized.

Of individuals with a lifetime history of mental disorder, only four in ten individuals will obtain professional help.

Anxiety disorders and depression are the most common mental illnesses in the United States ³. Of individuals with a lifetime history of mental disorder, only four in ten individuals will obtain professional help, with only one in four receiving help from a mental health professional ². For people who do seek help, most first seek help from a family physician. As such, the National Institute of Mental Health (NIMH) is partnering with the American Academy of Family Physicians in a yearlong program to educate physicians so that their patients can benefit from new research on mental illness. In addition, NIMH is conducting Anxiety Disorders and Depression Education Programs to inform the public and health care providers about new treatments available, and to reduce associated stigma so that people feel free to seek treatment ⁴.

Four risk factors:

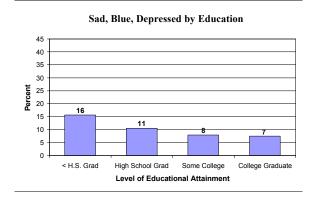
- Sad, blue, or depressed
- Worried, tense, or anxious
- Did not get enough rest or sleep
- Not very healthy and full of energy

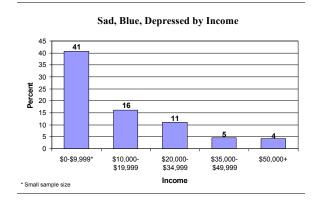
The measurement of quality of life is an area of intensive research. The complexity of the factors which contribute to physical, mental, emotional, and spiritual wellbeing is such that no optimal set of indicators exists to describe quality of life. Four risk factors were used to assess quality of life and mental health:

- (1) Respondents who felt they were sad, blue, or depressed for 14 or more of the last 30 days.
- (2) Respondents who felt they were worried, tense, or anxious for 14 or more of the last 30 days.
- (3) Respondents who felt they did not get enough rest or sleep for 14 or more of the last 30 days.
- (4) Respondents who did not very feel very healthy and full of energy for 14 or more of the last 30 days.

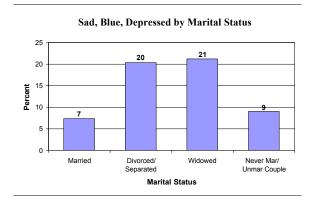
Sad, Blue, or Depressed

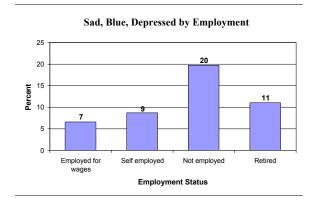
Ten percent of Sumner County respondents reported being sad, blue, or depressed for 14 or more of the past 30 days (depressed mood). This is twice the percentage observed statewide in 1999. Females reported a slightly higher percentage depressed mood than males (11% versus 8%). The prevalence of depressed mood decreased with increasing education levels and income.



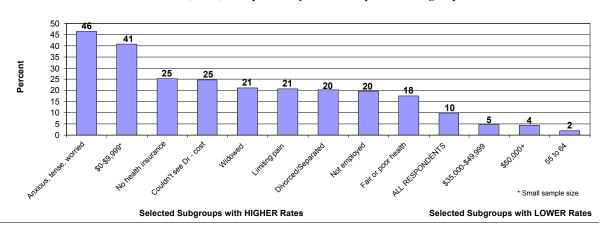


Respondents who were married, never married, or a member of an unmarried couple reported a lower prevalence of depressed mood than divorced, separated, and widowed respondents. Respondents who were unemployed reported a higher percentage of depressed mood (20%) than other employment groups.





Forty-six percent of those who experienced 14 or more days of being worried, tense or anxious reported being sad, blue, or depressed; this was significantly higher than the prevalence of depressed mood in the general population. Persons with limiting pain and those who couldn't see a doctor due to cost also displayed a significantly higher prevalence of depressed mood.

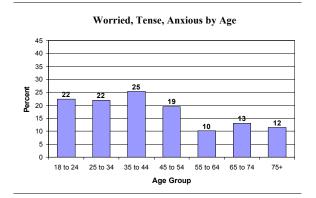


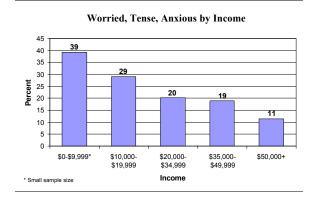
Sad, Blue, or Depressed by Selected Population Subgroups

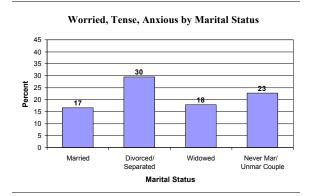
Worried, Tense, or Anxious

Nineteen percent reported being worried, tense, or anxious for 14 or more of the last 30 days (anxiety). This is higher than the 12% observed statewide in 1999. The risk prevalence of anxiety generally decreased with increasing age and household income.

Among martial status population subgroups, the highest prevalence of anxiety (30%) was observed in divorced or separated persons. Among employment population subgroups, retired persons had the lowest prevalence of anxiety.

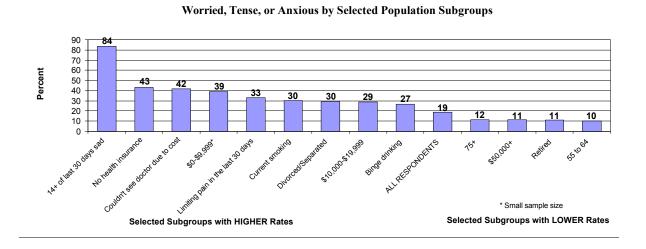








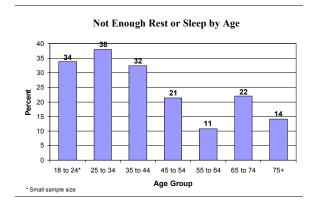
Eighty-four percent of those who were sad, blue, or depressed in 14 of the last 30 days also reported being worried, tense, or anxious in 14 of the last 30 days. Other factors which appeared to be associated with anxiety included not having health care coverage and having limiting pain in the last 30 days.



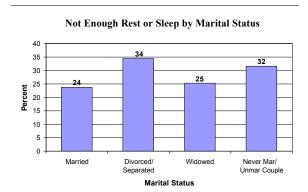
Not Enough Rest or Sleep

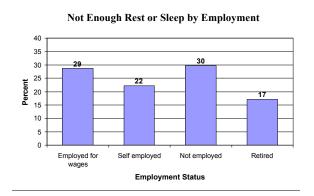
Twenty six percent of respondents reported not getting enough rest or sleep for 14 or more of the past 30 days. This is slightly higher than 22%, which was reported statewide in 1999. Not getting enough rest or sleep was generally more common in the younger age groups.

A higher percentage of respondents who were divorced, separated, never married, or a

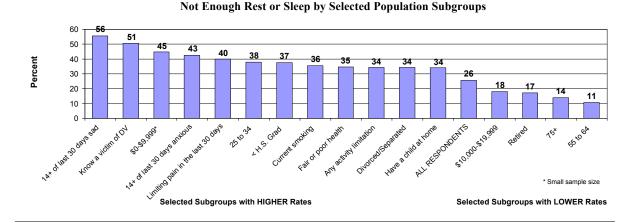


member of an unmarried couple reported not getting enough rest or sleep than those who were married or widowed. Also, higher percentages of not enough rest or sleep were observed in not employed or employed for wages respondents than self-employed or retired respondents.



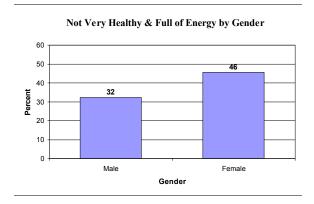


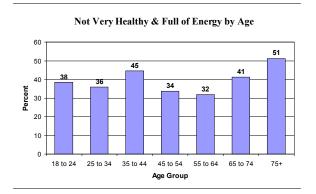
Other risk factors which appeared to be associated with not having enough rest or sleep included being sad, blue, or depressed 14 or more of the last 30 days; having known or seen a victim of domestic violence during the past year; being worried, tense, or anxious 14 or more of the last 30 days; having limiting pain in the last 30 days; current smoking; and having a child at home.



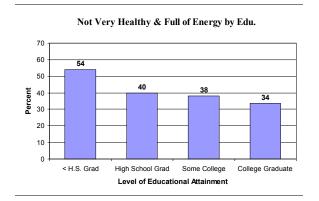
Not Very Healthy and Full of Energy

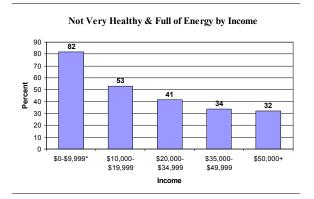
Thirty-seven percent of respondents reported not feeling very healthy and full of energy for 14 or more of the past 30 days. This is considerably higher than 23%, which was observed statewide in 1999. Females were more likely than males to report being not very healthy and full of energy. Risk prevalence varied among different age groups, though this variation was not statistically significant.



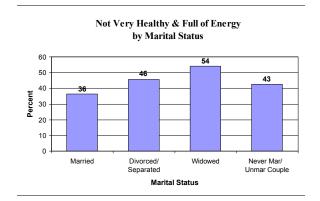


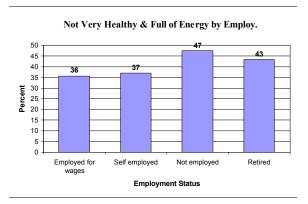
Risk prevalence generally decreased with increasing level of educational attainment and household income.



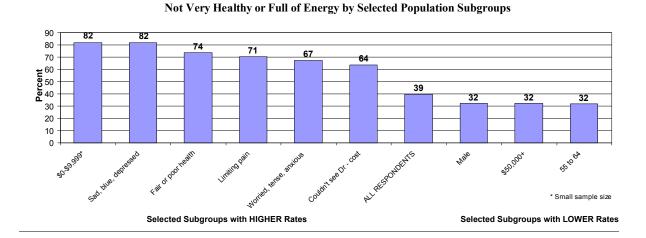


Widowed respondents were more likely to report being not very healthy and full of energy than married respondents, and among employment subcategories, persons who were not employed had the highest observed percentage for this risk factor.





Other risk factors which appeared to be associated with not being very healthy or full of energy include being sad, blue or depressed 14 or more of the last 30 days; having fair or poor health; being worried, tense, or anxious 14 or more of the last 30 days; and having limiting pain one or more of the last 30 days.



References

¹U.S. Department of Health and Human Services. *Mental Health: A Report of the Surgeon General-Executive Summary*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health, 1999.

² U.S. Department of Health and Human Services. Mental Health and Mental Disorders. In: *Healthy People 2010 Objectives: Draft for Public Comment.* Washington, DC: U.S. Department of Health and Human Services, office of Disease Prevention and Health Promotion, 1998, p. 23-4.

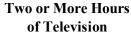
³ HHS Fact Sheet. The Department of Health and Human Services on Mental Health Issues, June 7, 1999. (Press release)

⁴ HHS Fact Sheet. The Department of Health and Human Services on Mental Health Issues, December 13, 1999. (Press release)

Two or More Hours of Television:

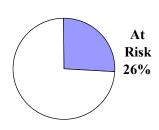
Respondents who reported that the oldest child in their household (among children aged 1 to 17) watched two or more hours of television the previous day.

Media Content Exposure: Respondents who reported no rules about program/movie content or no rules about video game content for the oldest child in their household (among children aged 1 to 17).





Media Content Exposure



PARENTING

Background

Family environment, beliefs, and behaviors can impact the acquisition of behaviors by children that promote or fail to promote health and well-being.

Raising children to be self-regulating individuals of emotional, mental, and physical maturity is clearly one of the important functions of the family. While models of family interaction exist which identify some of the factors which shape the development of children, much is not understood. Patterns of belief (values, attitudes, expectations), social environment (communication, organization, roles, rules) and behavior (modeling, positive and negative reinforcement, consistency) in families have all been shown to impact the acquisition of behaviors by children that promote or fail to promote health and well being. Factors which have been consistently found to negatively impact the healthy maturation of children include lack of clear expectations, excessively rigid or excessively lenient behavioral boundaries, harsh or inconsistent punishment, high levels of conflict between family members, positive parental attitudes toward harmful behaviors (e.g., drug use), low emotional cohesion between family members, poor communication, and parents who are not mutually supportive. On the family members are not mutually supportive.

Other survey data collected from children (Kansas Communities that Care) can provide county level data for many of these factors as perceived and reported by children. The parenting module in this survey provides measures of risk factors and health behaviors (e.g., time spent with children, communication, supervision, exposure to media, family structure) reported by a parent or guardian.

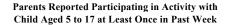
Risk factors:

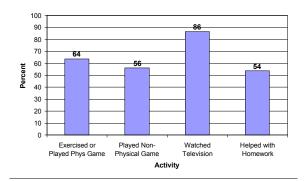
- Media content exposure: No rules about program/movie or video game content
- Two or more hours of television on previous day

How much television is too much? Is it acceptable for some children to be unsupervised after school? How much time should parents spend talking to their children? This data does not attempt to answer these questions, but rather attempts to identify the prevalence of behaviors which may place children at heightened risk. The number of children at risk was sufficient for detailed analysis of two risk factors: (1) "Media content exposure" defined as *no rules about program/movie content or no rules about video game content* identifies a sub-group of children who may be at increased risk of exposure to media violence or sexuality, and (2) "Two hours of television" defined as *watching two or more hours of television on the previous day* identifies a subgroup of children who may be at risk for limited physical activity, limited social interaction, or excessive exposure to media content from television viewing.

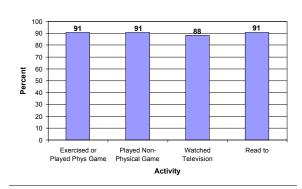
Healthy Parenting Behaviors

Most parents (64%) reported exercising or playing a physical game with their oldest child ages 5 to 17 at least once during the past week, and 54% reported helping the oldest child with homework at least once during the past week. Eighty-one percent of parents reported that they talked with their oldest child (ages 5 to 17) 20 minutes or more most days during the past week. Seventy-two percent of parents reported requiring their child to complete a chore four or more days the past week.





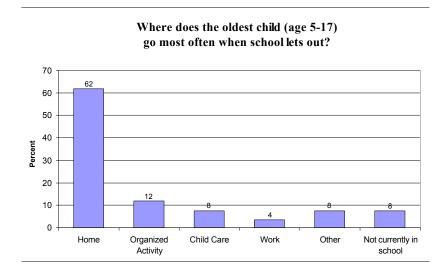
Parents Reported Participating in Activity with Child Aged 0 to 4 at Least Once in Past Week



Among parents with an oldest child aged 0 to 4, 91% of parents reported exercising or playing a physical game with their child at least once per week. The same proportion (91%) reported reading to their child at least one day per week. For both of these activities, approximately two-thirds of parents reported that they participated in the activity with their child on four or more days during the past week.

Supervision and Child Care

Among those children aged 5 to 17 currently in school at the time of the interview, 88% were supervised by an adult every day after school. Among children aged 0 to 4, 38% spent no time in a day care center, day care home, or preschool during the past week while 19% spent 33 or more hours per week in child care.

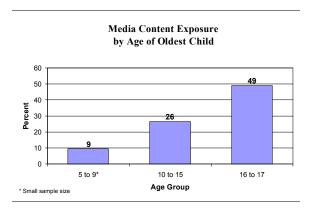


Family Rules

Over 90% of parents reported having rules about bedtime on school nights (among children aged 5 to 17), but only 52% reported having rules about how much television the oldest child watched. However, 85% of responding parents had rules about *which* television program the child could watch, and 80% had rules about which computer or video games the child was allowed to play.

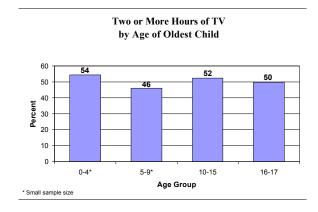
Media Content Exposure

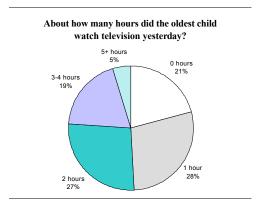
We defined a child as being at risk for media content exposure if parents did not have rules for both video games and program/movie content. Twenty-six percent of children were at risk. Risk was more prevalent among children ages 16 and 17. Differences across education levels of adult respondent or household income were not significant.



Two or More Hours Television

Fifty-one percent of the children age 1 to 17 were reported to have watched two or more hours of television on the day prior to the interview; this compared to 50% of children statewide in 1999. Nearly a fourth (24%) of children in Sumner County had watched three or more hours of television on the previous day. Risk prevalence did not vary much by the age of the child. No significant differences were observed across household income, educational level of respondent, and marital status of respondent, perhaps in part due to small sample sizes for some of the population subgroups.





References

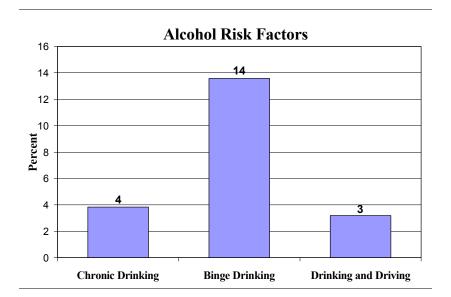
¹ Soubhi, H., Potvin, L. (2000) Homes and families as health promotion settings. In: Poland BD, Green LW, Rootman I (eds.) <u>Settings for health promotion: linking theory and practice</u>. Thousand Oaks: Sage Publications.

² Governor's Substance Abuse Council (1999). Kansas planning framework. State Incentive Cooperative Agreement, Federal Center for Substance Abuse Prevention.

Acute/Binge Drinking: Respondents who reported having five or more drinks on an occasion, one or more times during the past 30 days.

Chronic Drinking: Respondents who reported having 60 or more drinks during the past 30 days.

Drinking and Driving: Respondents who reported having driven after perhaps having too much to drink, one or more times in the past 30 days.



ALCOHOL USE

Background

Consequences of alcohol use depend on when, how often, how much, blood level, and certain unique responses that vary among individuals.

Self-reported alcohol use is likely to be substantially under reported.

Three risk factors:

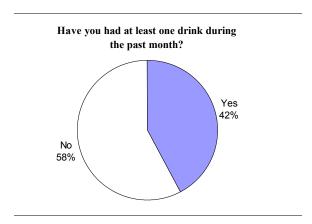
- Chronic drinking (high frequency of alcohol use)
- Binge drinking (intoxication)
- · Driving after drinking

Consequences of alcohol use depend on when, how often, how much, blood level, and certain unique responses to ingestion that vary among individuals. Generally, the health effects arising from the use of alcohol relate to impaired reasoning and reflexes (leading to injuries and violence), exposure during pregnancy, and cumulative organ damage from chronic use. The highest safe level of chronic use of alcohol is unknown, but likely varies between individuals. Heavy alcohol consumption has been associated with an increased risk of numerous diseases including neurologic damage, vascular disease (heart disease, stroke, and high blood pressure), cirrhosis, and several types of cancer (e.g., esophageal, liver). Maternal use of alcohol during pregnancy is a leading cause of birth defects. No less a problem are the consequences of alcohol and drug use arising from impaired judgment of the user. The use of alcohol is a strong risk factor for both violent and unintentional injuries including homicide, suicide, assault, family abuse, motor vehicle crashes, and drowning. Alcohol use is also associated with an increased risk of contracting sexually transmitted diseases (including AIDS), and having an unintended pregnancy.

For this study, alcohol use was assessed using three indicators to measure high frequency of use, intoxication, and driving after drinking. Like all data in this survey, data related to alcohol use is self-reported. While self-reported risk has been found to be accurate for many risk factors, self-reported alcohol use is likely to be substantially under reported. Because of the difficulty involved in collecting data regarding alcohol use by methods other than self-report, data derived from independently confirmed sources are rarely available.

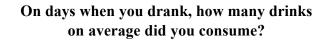
Alcohol Consumption

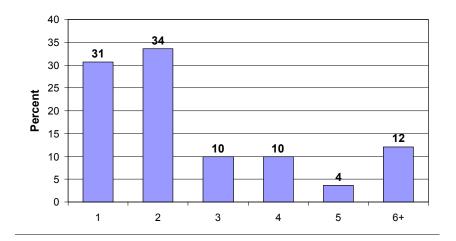
Forty-two percent of respondents reported any alcohol consumption during the 30 days before the interview; 26% of respondents consumed alcohol 1 to 5 days while 15% consumed alcohol for more than 5 of the last 30 days.





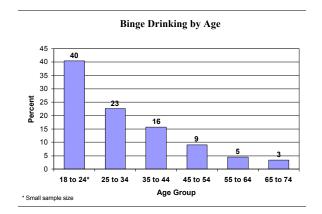
Among those who drank, most reported having only one or two drinks on average.

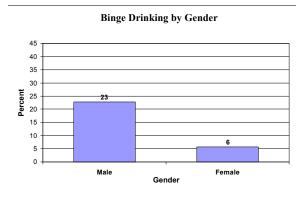




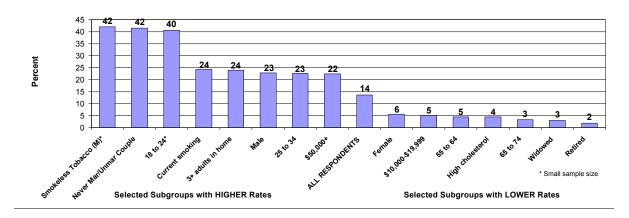
Who's At Risk

Four percent of respondents reported having 60 or more drinks per month, placing them at risk for chronic drinking. This is similar to three percent observed statewide (1999). Three percent reported driving after drinking, which is less than the six percent reported statewide (1999). Fourteen percent of respondents reported binge drinking which was not substantially different than the percentage observed statewide in 1999 (12%). Binge drinking was significantly more common among males than females, and was higher among the young than the old. Other factors which appeared to be associated with binge drinking included using smokeless tobacco (males), being a current smoker, being unmarried, and having three or more adults in the home.





Binge Drinking by Selected Population Subgroups



References

National Committee for Injury Prevention and Control. (1989) <u>Injury prevention:</u> meeting the challenge. New York: Oxford University Press.

Dufour, M.C. (1998) Alcohol Use. In: Brownson, R.C., Remington, P.L., Davis, J.R. (eds.). <u>Chronic disease epidemiology and control</u>, American Public Health Association, Washington DC: United Book Press.

Afraid to Leave Home at Night:

Respondents who reported being very or somewhat afraid to leave their home at night.

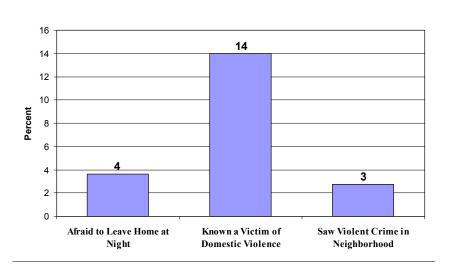
Known a Victim of Domestic

Violence: Respondents who reported that they have known or seen someone who was beaten or otherwise hurt by their husband, wife, boyfriend, or girlfriend during the past year.

Saw Violent Crime in

Neighborhood: Respondents who reported they saw a violent crime (someone hurting or trying to hurt someone else) in the past year in their neighborhood.

Violence & Crime



VIOLENCE AND CRIME

Background

Violence has no simple cause but rather is the end result of myriad contributing factors. Every violent crime involves at least three tragedies - that of the victim who may or may not completely heal his or her physical and emotional injuries; that of the perpetrator, whether juvenile or adult, whose choice to hurt others is self-destructive; and that of the community where bonds of trust and security, which create attachment to the community, are strained or broken. Violence has no simple cause but rather is the end result of myriad contributing factors including exposure to media violence, tolerance for violence in the home and in schools, alcohol and drug use, mental illness, easy access to weapons, lack of appropriate role models, poor parenting, poverty and injustice, lack of supervision of juveniles, social ostracism, and even boredom (NCICP, 1989, GSAC, 1999).

Risk factor measuring affect of violence on personal security

 Afraid to Leave Home at Night

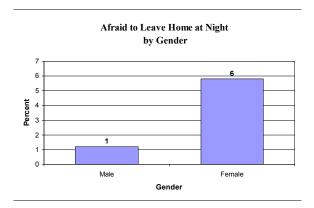
Risk factors measuring exposure to violence

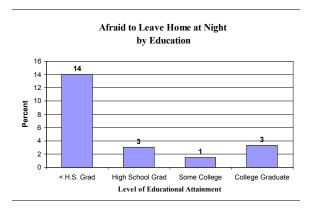
- Know a Victim of Domestic Violence
- Saw Violent Crime in Neighborhood

While the data presented here cannot define and measure each of the many contributing factors, it does provide some baseline measures for the prevalence of violence and the impact violence has on community residents. One question from the survey: How afraid are you to leave your home at night? directly measures the effect of violence on personal security. Two other questions - When was the last time you saw a violent crime in your neighborhood? and During the past year have you known or seen anyone who was beaten or otherwise hurt by their husband, wife, boyfriend, or girlfriend? are measures of violence exposure and act as indirect indicators of the prevalence of violence. (Note: Questions which ask persons about their own violent behavior are unlikely to give accurate results, and questions about personal victimization by domestic violence may pose a threat to the respondent, so they are not asked during routine surveying. In responding to the question *During* the past year have you known or seen anyone who was beaten or otherwise hurt by their husband, wife, boyfriend, or girlfriend? some persons appear to include themselves in the answer and others do not, so the question cannot be considered an accurate measure of domestic violence prevalence, yet may be sufficiently consistent over time to be a usable marker.)

Afraid to Leave Home at Night

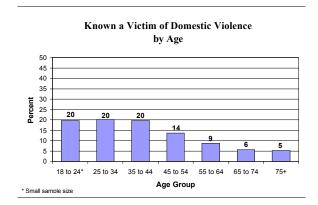
Four percent of respondents reported being very or somewhat afraid to leave home at night. Women were more likely than men to report being afraid to leave home at night (6% versus 1%). Fear of leaving home at night was higher among those with lower household incomes and education level.

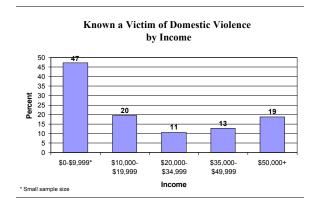




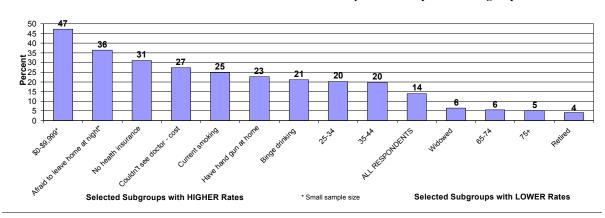
Known a Victim of Domestic Violence

Fourteen percent reported having known or seen a victim of domestic violence in the last year. This was substantially lower than the percentage observed statewide in 1996 (30%). Having known or seen a victim of domestic violence decreased with advancing age and was more prevalent in the lower income groups. Other factors which appeared to be associated with this risk factor included being afraid to leave home at night, and having no health care coverage.





Known or Seen Victim of Domestic Violence by Selected Population Subgroups



Saw a Violent Crime in Neighborhood

Three percent of respondents reported having witnessed a violent crime in their neighborhood during the past year. This was substantially lower than the 8% reported statewide in 1996. Sample sizes were too small to detect significant differences in population subgroups.

References

The National Committee for Injury Prevention and Control. (1989) <u>Injury prevention: meeting the challenge</u>. New York: Oxford University Press.

Governor's Substance Abuse Council. (1999). Kansas planning framework. State Incentive Cooperative Agreement, Federal Center for Substance Abuse Prevention.

SURVEY QUESTIONS

This table provides the text of each question followed by the number and percentage of respondents for each response category (excluding unknown and refused). Not all persons were asked all questions. For instance, only women were asked questions about mammography. As another example, the question "Do you smoke now?" was only asked of persons who reported having ever smoked at least 100 cigarettes in their lifetime. However, the denominator for this question has been adjusted for this table to represent the entire population, thereby providing the percentage of current smokers in the entire population rather than the percentage of smokers among those who had ever smoked at least 100 cigarettes. The correct denominator is provided parenthetically after the text of the question.

All responses in this survey are weighted (see technical notes). Because each respondent has a different statistical weight, the number of respondents will not match the weighted percentage. For instance, if 100 persons were asked a question, 50 persons could say "yes" representing 45%, and the other 50 persons could say "no" representing 55%. Unless otherwise stated, results are weighted to adults 18 years and older. Questions which pertain to households are weighted using a household weight, and questions which pertain to children are weighted using a child weight appropriate to the age group specified by the question. When a household or child weight was used, this is specified after the text of the question.

Section 1: Health Status

0

Would you say that in general your health is: (among all respondents)

Excellent	132	19.1
Very good	253	32.9
Good	239	30.8
Fair	96	12.8
Poor	40	4.4

Section 2: Health Care Access

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Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare? (among all respondents)

Yes	680	89.3
No	79	10.7

Do you have Medicare? (among respondents reporting health care coverage)

Yes	211	31.6
Nο	469	68 4

What type of health care coverage do you use to pay for most of your medical care? (among respondents reporting health care coverage besides Medicare):

Your employer	286	63.3
Someone else's employer	121	26.9
A plan that you or someone else buys on your own	35	7.4
Medicare	1	0.2
Medicaid or Medical Assistance	8	1.3
The military, CHAMPUS, or the VA	6	0.9

About how long has it been since you had health care coverage? (among respondents reporting no current heath care coverage)

Within the past 6 months	14	22.5
Within the past year	8	24.6
Within the past 2 years	7	15.1
Within the past 5 years	12	16.8
5 or more years ago	14	21.1

During the past 12 months, was there any time that you did not have any health insurance or coverage? (among respondents reporting health care coverage)

Yes	30	4.8
No	662	95.2

Section 2: Health Care Access

0/

Was there a time during the last 12 months when you needed to see a doctor, but could not because of the cost? (among all respondents)

Yes	75	9.5
No	685	90.5

Is there one particular doctor or health professional who you usually go to when you need routine medical care? (among all respondents)

Yes, only one	686	89.6
More than one	21	3.0
No	55	7.4

About how long has it been since you last visited a doctor for a routine checkup? (among all respondents)

Within the past year	547	70.9
Within the past 2 years	88	11.9
Within the past 5 years	47	6.8
5 or more years ago	58	8.8
Never	11	1.6

Section 3: Hypertension Awareness

%

About how long has it been since you last had your blood pressure taken by a doctor, nurse, or other health professional? (among all respondents)

Within the past 6 months	572	75.2
Within the past year	83	12.0
Within the past 2 years	49	7.1
Within the past 5 years	25	3.5
5 or more years ago	17	2.2
Never	1	0.1

Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure? (among respondents reporting having their blood pressure checked)

Yes	228	31.1
No	533	68.9

Have you been told on more than one occasion that your blood pressure was high, or have you been told this only once? (among respondents reporting being told they had high blood pressure)

More than once	181	75.6
Only once	46	24.4

Section 4: Cholesterol Awareness

0/

Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked? (among all respondents)

Yes 541 70.2 No 197 29.8

About how long has it been since you last had your blood cholesterol checked? (among respondents reporting having their cholesterol checked)

Within the past year	344	66.0
Within the past 2 years	77	14.3
Within the past 5 years	52	9.6
5 or more years ago	50	10.1
Never	0	0.0

Have you ever been told by a doctor or other health professional that your blood cholesterol is high? (among respondents reporting having their cholesterol checked)

Yes 183 33.6 No 352 66.4

Section 5: Diabetes

n

Have you ever been told by a doctor that you have diabetes? (among all respondents)

Yes, but female told only during pregnancy 7 0.8

No 698 90.4

Section 6: Exercise

n

During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise? (among all respondents)

Yes 540 69.9 No 222 30.1

Section 6: Exercise

0,

What type of physical activity or exercise did you spend the most time doing during the past month? (top eight responses among respondents reporting participating in a physical activity)

Walking	295	50.7
Gardening	80	14.4
Aerobics class	21	3.8
Golf	19	4.6
Bicycling	15	2.9
Running	14	3.8
Weight lifting	13	3.6
Basketball	10	2.5

How many times per week did you take part in this activity during the past month? (total times per week for a physical activity, among all respondents)

None	222	30.5
Less than three	218	28.9
Three or four	180	22.7
Five or six	73	10.2
Seven or more	57	7.7

And when you took part in this activity, for how many minutes or hours did you usually keep at it? (total hours per week, among all respondents)

None	222	31.5
Less than one	293	37.8
One or two	169	24.3
Three or four	33	5.2
Greater than four	6	1.2

Was there another physical activity or exercise that you participated in during the last month? (among respondents reporting participating in a physical activity)

Yes 144 27.3 No 396 72.7

Section 6: Exercise

0

What other type of physical activity gave you the next most exercise during the past month? (top six responses among respondents reporting participating in a physical activity)

Gardening	42	27.8
Walking	32	18.0
Bicycling	10	9.9
Weight lifting	8	8.8
Running	7	5.7
Aerobics class	7	3.2

Section 7: Seat Belt Use

0

How often do you use seatbelts when you drive or ride in a car? (among all respondents)

Always	424	52.7
Nearly Always	162	20.9
Sometimes	85	12.2
Seldom	39	7.1
Never	51	7 1

How often does the oldest child in your household use a car safety seat [for child under 5] or seatbelt [for child 5 or older] when they ride in a car? (among respondents with a child under 16)

Always	184	75.8
Nearly Always	36	12.5
Sometimes	25	8.3
Seldom	6	1.9
Never	5	1.5

Section 8: Tobacco

ı %

Have you smoked at least 100 cigarettes in your entire life? (among all respondents)

Yes	363	50.6
No	398	49.4

Do you now smoke cigarettes everyday, some days, or not at all? (among all respondents)

Everyday	149	20.3
Some days	38	5.0
Not at all	573	74.7

Section 8: Tobacco

ւ %

On the average, when you smoked during the past 30 days, about how many cigarettes did you smoke a day? (among respondents reporting non-daily current smoking)

6.9	1	Less than half pack per day (ppd)
47.2	10	More than half, but less than one ppd
20.8	5	One ppd
10.3	3	More than one but less than two ppd
14.8	4	Two or more ppd

On the average, about how many cigarettes a day do you now smoke? (among respondents reporting smoking daily)

Less than half pack per day (ppd)	32	24.3
More than half, but less than one ppd	14	9.6
One ppd	66	41.3
More than one but less than two ppd	20	13.1
Two or more ppd	15	11.6

During the past 12 months, have you quit smoking for 1 day or longer? (among respondents reporting smoking daily)

Yes	70	51.7
No	79	48.3

About how long has it been since you last smoked cigarettes regularly, that is, daily? (among respondents who are former smokers)

Within the past month	4	3.5
Within the past 3 months	2	1.9
Within the past 6 months	4	2.5
Within the past year	7	3.9
Within the past 5 years	36	19.1
Within the past 15 years	44	25.7
15 or more vears ago	74	43.4

Section 9: Smokeless Tobacco Use

n %

Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff? (among all respondents)

Yes, chewing tobacco	64	13.5
Yes, snuff	13	2.2
Yes, both	31	5.4
No, neither	653	79.0

Do you currently use any smokeless tobacco products such as chewing tobacco or snuff? (among through 12 years old? (among all respondents reporting smokeless tobacco use) How many children live in your household through 12 years old? (among all respondents reporting smokeless tobacco use)					
Yes, chewing tobacco	21	29.1	One	92	12.0
Yes, snuff	6	5.3	Two	54	6.8
Yes, both	7	5.2	Three	12	1.7
No, neither	73	60.4	Four	8	1.0
			None	594	78.4
Section 10: Demographics	n	%	How many children live in your household w	iho are	13
What is your age? (among all respondents))		through 17 years old? (among all responde		
18-24	50	10.2	household weight)		
25-34	103	16.9	One	105	13.0
35-44	152	21.5	Two	28	3.5
45-54	157	16.1	Three	4	0.4
55-64	104	12.1	None	624	83.1
65-74	95	13.2	What is the highest grade or year of school	VOII	
75+	92	10.1	completed? (among all respondents)	,	
What is your race? (among all respondents	:)		Never attended school or only kindergarten	1	1.7
White	739	96.9	Grades 1 through 8 (Elementary)	19	2.3
Black	3	0.4	Grades 9 through 11 (Some high school)	59	7.8
Asian, Pacific Islander	2	0.1	Grade 12 or GED (High school graduate)	318	42.3
American Indian, Alaska Native	6	0.9	College 1 year to 3 years (Some college)	237	30.6
Other	11	1.6	College 4 years or more (College graduate)	125	15.2
Are you of Spanish or Hispanic origin? (among all		II	Are you currently: (among all respondents)		
respondents)			Employed for wages	396	54.5
Yes	23	4.5	Self-employed	58	7.8
No	737	95.5	Out of work for more than 1 year	8	1.3
Are you: (among all respondents)			Out of work for less than 1 year	9	1.2
		-0 -	Homemaker	74	8.7
Married	475	70.5	Student	12	2.0
Divorced/Separated	100	9.0	Retired	185	22.6
Widowed	99	8.3	Unable to work	17	1.9
Never married / Unmarried couple	Is your annual household income from all sources.		<i>:</i>		
How many children live in your household withan 5 years old? (among all respondents,		eiess	\$0-\$9,999	34	4.2
household weight) One 68			\$10,000-\$19,999	76	9.6
		8.8	\$20,000-\$34,999	190	33.5
Two	29	4.0	\$35,000-\$49,999	146	24.7
Three	3	0.4	\$50,000+	161	28.0
Four	1	0.1			
None	660	86.7			

n %

Section 9: Smokeless Tobacco Use

Section 10: Demographics

Section 10: Demographics	n	%
What is your zip code? (among all respond	ents)	
67004	30	4.2
67013	87	11.2
67022	63	8.5
67031	70	8.9
67103	15	1.6
67105	9	1.0
67106	6	1.0
67110	86	11.8
67119	42	5.6
67140	24	2.8
67152	290	38.0
How many racidential talanhana numbers d	0 1/0//	
How many residential telephone numbers de have? (among all respondents)	o you	
1	694	94.9
2	59	4.7
3	6	0.3
4	1	0.0
Gender of respondent. (among all responde	ents)	
Male	265	47.6
Female	497	52.4

Section '	11: Wo	men's	Health
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n %

A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram? (among women respondents)

Yes 327 61.6 No 167 38.4

How long has it been since you had your last mammogram? (among women respondents reporting having had a mammogram)

Within the past year (1 to 12 months ago)	199	62.3
Within the past 2 years (1 to 2 years ago)	63	18.2
Within the past 3 years (2 to 3 years ago)	17	6.9
Within the past 5 years (3 to 5 years ago)	14	4.7
5 or more years ago	28	8.0

Section 11: Women's Health

0/

Was your last mammogram done as part of a routine checkup, because of a breast problem other than cancer, or because you've already had breast cancer? (among women respondents reporting having had a mammogram)

Routine checkup	300	90.9
Breast problem other than cancer	21	7.7
Had breast cancer	5	1.4

A clinical breast exam is when a doctor, nurse, or other health professional feels the breast for lumps. Have you ever had a clinical breast exam? (among women respondents)

> Yes 410 81.2 No 83 18.8

How long has it been since your last breast exam? (among women respondents reporting having had a clinical breast exam)

Within the past year (1 to 12 months ago)	285	71.6
Within the past 2 years (1 to 2 years ago)	56	13.0
Within the past 3 years (2 to 3 years ago)	18	4.6
Within the past 5 years (3 to 5 years ago)	17	5.0
5 or more years ago	23	5.8

Was your last breast exam done as part of a routine checkup, because of a breast problem other than cancer, or because you've already had breast cancer? (among women respondents reporting having had a clinical breast exam)

Routine checkup	386	95.4
Breast problem other than cancer	15	3.7
Had breast cancer	5	0.9

A Pap smear is a test for cancer of the cervix. Have you ever had a Pap smear? (among women respondents)

Yes	475	95.1	
No	19	4.9	

How long has it been since you had your last Pap smear? (among women respondents reporting having had a pap smear)

Within the past year (1 to 12 months ago)	262	58.6
Within the past 2 years (1 to 2 years ago)	77	15.7
Within the past 3 years (2 to 3 years ago)	32	6.5
Within the past 5 years (3 to 5 years ago)	23	5.3
5 or more years ago	70	14.0

Section 11: Women's Health

0/

Was your last Pap smear done as part of a routine exam, or to check a current or previous problem? (among women respondents reporting having had a pap smear)

Routine exam	447	94.1
Check current or previous problem	19	4.4
Other	6	1.5

Have you had a hysterectomy? (among women respondents)

Yes 166 30.8 No 328 69.2

To your knowledge, are you now pregnant? (among women respondents 18-44 years old)

Yes 9 7.4 No 168 92.6

Section 12: Immunization

1

During the past 12 months, have you had a flu shot? (among all respondents)

Yes	282	36.5
No	473	63.5

Have you ever had a pneumonia vaccination? (among all respondents)

Yes 182 25.7 No 556 74.3

Section 13: HIV / AIDS

n

What are your chances of getting infected with HIV, the virus that causes AIDS? (among all respondents 18-64 years old)

High	5	1.0
Medium	20	5.8
Low	125	20.8
None	416	70.4

Have you ever had your blood tested for HIV? (among respondents reporting not having HIV and 18-64 years old)

Yes 189 35.8 No 365 64.2

Section 13: HIV / AIDS

0/

When was your last blood test for HIV? (among respondents reporting having had an HIV blood test and 18-64 years old)

Before	1990	3	1.7
	1990	11	8.7
	1991	2	1.3
	1992	3	3.5
	1993	6	4.3
	1994	4	4.1
	1995	8	7.2
	1996	5	4.0
	1997	12	10.9
	1998	15	18.5
	1999	22	20.1
	2000	18	15.8

What was the main reason you had your last blood test for HIV? (among respondents reporting having had an HIV blood test and 18-64 years old)

Just to find out if you were in	nfected 47	7 25.2
Because it was part of a blo or donation p		5 13.7
Because of pre	gnancy 22	2 12.5
For routine ch	eck-up 16	3 10.0
For hospitalization or surgical pro	cedure 19	7.4
To apply for life ins	urance 9	9 4.6
To apply for health ins	urance	7 3.5
Because of occupational ex	posure 6	3 2.7
Because I am at risk	for HIV 4	1 2.4
For empl	oyment 4	4 2.1
To apply for a marriage	license 4	1 2.0
For military induction or military	service 3	3 1.9
Because of	illness 2	2 1.5
Because of referral by a	doctor	2 0.6
Referred by your sex	partner ´	0.3
	Other 17	7 9.5
•	partner ´	1 0.

Section 13: HIV / AIDS

0/

Where did you have your last blood test for HIV? (among respondents reporting having had an HIV blood test and 18-64 years old)

Private doctor, HMO	72	38.6
Hospital, emergency room, outpatient clinic	42	23.4
Blood bank, plasma center, Red Cross	28	14.2
Health department	12	7.0
Other public clinic	4	3.3
Military induction or military service site	5	2.7
At home, home visit by nurse or health worker	4	2.1
Insurance company clinic	4	1.7
Family planning clinic	2	1.2
Community health clinic	3	1.1
Clinic run by employer	3	0.6
AIDS clinic, counseling, testing site	2	0.9
STD clinic	1	0.7
Other	5	2.5

Did you receive the results of your last test? (among respondents reporting having had an HIV blood test and 18-64 years old)

Yes	168	92.1
No	20	7.9

Section 14: Quality of Life

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Are you limited in any way in any activities because of any impairment or health problem? (among all respondents)

Yes	141	16.8
Nο	613	83 2

Section 14: Quality of Life

0/

What is the major impairment or health problem that limits your activities? (among respondents reporting any activity limitation)

22.2	32	Back or neck problem
8.6	15	Arthritis/rheumatism
9.2	12	Fractures, bone/joint injury
8.3	12	Walking problem
8.8	12	Heart problem
7.3	10	Lung/breathing problem
4.4	8	Stroke problem
3.1	3	Diabetes
1.8	2	Cancer
0.4	1	Hypertension/high blood pressure
0.4	1	Eye/vision problem
25.4	32	Other impairment/problem

For how long have your activities been limited because of your major impairment or health problem? (among respondents reporting any activity limitation)

Six months or less	18	13.4
More than six months, less than a year	2	1.8
One to five years	65	42.7
Six to ten years	26	20.4
11 to 20 years	15	11.7
More than 20 years	12	10.1

Because of any impairment or health problem, do you need the help of other persons with your PERSONAL CARE needs, such as eating, bathing, dressing, or getting around the house? (among respondents reporting any activity limitation)

Yes 20 13.4 No 121 86.6

Because of any impairment or health problem, do you need the help of other persons in handling your ROUTINE needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes? (among respondents reporting any activity limitation)

Yes 47 28.9 No 94 71.1

Section 14: Quality of Life

%

During the past 30 days, for about how many days did pain make it hard for you to do your usual activities, such as self-care, work, or recreation? (among all respondents)

0 days	552	75.6
1 to 4 days	46	8.0
5 to 13 days	36	4.5
14 to 29 days	33	4.4
30 days	67	7.4

During the past 30 days, for about how many days have you felt sad, blue, or depressed? (among all respondents)

0 days	455	65.4
1 to 4 days	131	17.0
5 to 13 days	53	7.9
14 to 29 days	39	4.7
30 days	39	5.0

During the past 30 days, for about how many days have you felt worried, tense, or anxious? (among all respondents)

0 days	346	47.9
1 to 4 days	138	18.1
5 to 13 days	105	15.4
14 to 29 days	59	8.7
30 days	74	9.9

During the past 30 days, for about how many days have you felt you did not get enough rest or sleep? (among all respondents)

0 days	282	38.8
1 to 4 days	117	16.7
5 to 13 days	138	18.8
14 to 29 days	101	13.3
30 days	95	12.4

During the past 30 days, for about how many days have you felt very healthy and full of energy? (among all respondents)

0 days	93	11.5
1 to 4 days	45	5.1
5 to 13 days	77	10.5
14 to 29 days	280	39.7
30 days	223	33.1

Module 1: Parenting

%

What is the age of the oldest child in your household under the age of 18? (among respondents reporting children in household; weighted for children 0-17 years old)

0-4	40	24.1
5-9	51	26.2
10-14	96	29.9
15-17	89	19.8

Are you a parent or a guardian of this child? (among respondents reporting children in household; weighted for children 0-17 years old)

Yes	257	95.4
No	18	4.6

Would you say you are the parent or guardian who spends the most time caring for the oldest child? (among respondents reporting children in household; weighted for children 0-17 years old)

Yes	185	74.8
Nο	66	25.2

Is the oldest child's time divided between parents or guardians who live in separate households? (among respondents reporting children in household; weighted for children 0-17 years old)

Yes	45	18.0
No	212	82.0

About how many hours did the oldest child watch television yesterday? (among respondents reporting children in household; weighted for children 0-17 years old)

None	50	20.8
One	69	28.5
Two	61	26.8
Three to four	47	19.1
Five or more	13	4.8

How many days out of the past seven days did you play a sport, physical game, or exercised together with the oldest child? (among respondents reporting children 5-17 years old in household)

None	86	36.4
One	25	13.2
Two	27	13.9
Three	23	11.2
Four or more	48	25.3

Module 1: Parenting

9

How many days out of the past seven days did you play a non-physical game with the oldest child? (among respondents reporting children 5-17 years old in household)

None 97 43.7 One 26 12.6 Two 30 13.4 Three 11 6.0 Four or more 48 24.2

How many days out of the past seven days did you watch television with with the oldest child? (among respondents reporting children 5-17 years old in household)

None 28 13.7 One 28 12.2 Two 50 21.2 Three 29 13.4 Four or more 80 39.6

How many days out of the past seven days did you spend at least 20 minutes talking with the oldest child? (among respondents reporting children 5-17 years old in household)

None 10 5.1
One 6 3.2
Two 13 6.3
Three 10 4.1
Four or more 177 81.2

How many days out of the past seven days did you help the oldest child with school activities or homework? (among respondents reporting children 5-17 years old in household)

None 91 46.5 One 12 5.2 Two 16 6.8 Three 19 9.4 Four or more 64 32.2

Module 1: Parenting

%

60.0

How many days out of the past seven days did you make the oldest child responsible for completing a household chore? (among respondents reporting children 5-17 years old in household)

None	17	8.0
One	9	4.6
Two	13	6.5
Three	20	9.3
Four or more	157	71.6

How many days out of the past seven days did you attend a game or event the oldest child participated in? (among respondents reporting children 5-17 years old in household)

None	121	60.0
One	28	14.8
Two	21	10.4
Three	22	8.6
Four or more	13	6.2

Are there family rules about . . .

. . . what time the oldest child goes to bed on a school night? (among all respondents reporting children 5-17 years old in household; weighted for children 0-17 years old)

Yes	192	91.6
No	25	2 4

... the amount of time the oldest child is allowed to watch television? (among respondents reporting children 5-17 years old in household; weighted for children 0-17 years old)

> Yes 100 52.1 No 117 47.9

... which television programs and movies the oldest child is allowed to watch? (among respondents reporting children 5-17 years old in household; weighted for children 0-17 years old)

> Yes 173 85.3 No 42 14.7

... which computer or video games the oldest child is allowed to play? (among respondents reporting children 5-17 years old in household; weighted for children 0-17 years old)

Yes 163 79.5 No 52 20.5

Module 1: Parenting

0/0

Where does the oldest child go most often when school lets out? (among respondents reporting children 5-17 years old in household; weighted for children 0-17 years old)

Home	126	61.9
After school sport/club/other organized activity	33	12.0
Child care provider/babysitter	12	7.5
Work	10	3.6
Friend's home	6	2.3
Neighbor's home	3	1.3
Spends time with friends	3	1.1
Community organization (YMCA, library, etc.)	3	1.1
Other	4	1.8
Not in school currently	17	7.6

On how many days out of the past seven days was the oldest child supervised by an adult after school? (among respondents reporting children 5-17 years old in household; weighted for children 0-17 years old)

None	13	7.7
Two	2	1.0
Three	2	1.0
Four	5	2.4
Five	112	87.9

How many days during the past seven days you have played a sport, physical game, or exercised with the oldest child? (among respondents reporting children 0-4 in household)

None	3	9.3
One	1	2.5
Two	3	7.9
Three	5	14.3
Four or more	23	66.0

How many days during the past seven days you have played a non-physical game with the oldest child? (among respondents reporting children 0-4 in household)

None	3	9.2
One	3	10.6
Two	6	15.6
Three	3	7.2
Four or more	19	57 4

Module 1: Parenting

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How many days during the past seven days you have watched television with the oldest child? (among respondents reporting children 0-4 in household)

None	3	11.7
One	4	9.8
Two	3	9.8
Four or more	24	68.6

How many days during the past seven days you have read to the oldest child? (among respondents reporting children 0-4 in household)

None	2	9.3
One	1	2.6
Two	5	16.5
Three	2	6.6
Four or more	24	65.0

About how many hours per week does the oldest child spend in a day care center, day care home, or preschool? (among respondents reporting children 0-4 in household; weighted for children 0-17 years old)

None	14	37.8
1-8	5	13.5
9-16	6	16.2
17-24	4	10.8
25-32	1	2.7
33 or more	7	18 Q

Module 2: Health Care Coverage

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What is the main reason you are without health care coverage? (among respondents without current health care coverage)

44.1	25	Couldn't afford to pay the premiums
19.4	9	Lost job or changed employers
10.0	7	Employer doesn't offer or stopped offering coverage
4.2	4	Spouse/parent lost job or changed employers
2.0	2	Became divorced or separated
2.9	1	Cut back to part time or became temporary employee
1.6	1	Benefits from employer ran out
0.9	1	Insurance company refused coverage
14.9	9	Other

Module 2: Health Care Coverage

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Other than the heath care coverage which pays for most of your medical care, do you have any other type of health care coverage? (among respondents with current health care coverage)

> Yes 218 31.3 No 465 68.7

What was the main reason you were without health care coverage? (among respondents with current health insurance, but without insurance during the past 12 months)

Lost job or changed employers	10	55.0
Couldn't afford to pay the premiums	7	37.7
Employer doesn't offer or stopped offering coverage	1	5.1
Spouse/parent lost job or changed employers	1	2.2

Module 3: Preventive Counseling Serv. n %

Has a doctor or other health professional ever talked with you about your diet or eating habits? (among all respondents)

Yes, within the past 12 months	158	19.8
Yes, within the past 3 years	52	7.7
Yes, 3 or more years ago	63	9.8
No	472	62.7

Has a doctor or other health professional ever talked with you about physical activity or exercise? (among all respondents)

24.7	200	Yes, within the past 12 months
8.7	58	Yes, within the past 3 years
7.1	44	Yes, 3 or more years ago
59.5	443	No

Has a doctor or other health professional ever talked with you about injury prevention, such as safety belt use, helmet use, or smoke detectors? (among all respondents)

Yes, within the past 12 months	75	10.6
Yes, within the past 3 years	22	3.5
Yes, 3 or more years ago	19	3.0
No	626	82.9

Module 3: Preventive Counseling Serv.

%

Has a doctor or other health professional ever talked with you about drug abuse? (among all respondents)

Yes, within the past 12 months	35	4.5
Yes, within the past 3 years	15	2.5
Yes, 3 or more years ago	18	3.1
No	678	89.9

Has a doctor or other health professional ever talked with you about alcohol use? (among all respondents)

Yes, within the past 12 months	39	4.9
Yes, within the past 3 years	14	2.3
Yes, 3 or more years ago	25	4.3
No	667	88.5

Has a doctor or other health professional ever advised you to quit smoking? (among respondents reporting current smoking)

Yes, within the past 12 months	98	50.1
Yes, within the past 3 years	33	19.3
Yes, 3 or more years ago	22	13.5
No	29	17.0

Has a doctor or other health professional ever talked with you about your sexual practices, including family planning, sexually transmitted diseases, AIDS, or the use of condoms? (among all respondents 18-64 years old)

49 9.6	Yes, within the past 12 months
14 2.9	Yes, within the past 3 years
76 13.4	Yes, 3 or more years ago
420 74.1	No

Module 4: Fruits and Vegetables

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How often do you drink fruit juices such as orange, grapefruit, or tomato? (on a daily basis among all respondents)

Less than one	397	54.2
One to four times	317	45.0
Five or more times	8	0.9

Not counting juice, how often do you eat fruit? (on a daily basis among all respondents)

Less than one	415	58.9
One to four times	302	40.4
Five or more times	6	0.8

Module 4: Fruits and Vegetables

0/

How often do you eat green salad? (on a daily basis among all respondents)

Less than one 579 79.1
One to four times 147 20.3
Five or more times 5 0.7

How often do you eat potatoes not including french fries, fried potatoes, or potato chips? (on a daily basis among all respondents)

Less than one 596 82.1
One to four times 124 17.5
Five or more times 3 0.4

How often do you eat carrots? (on a daily basis among all respondents)

Less than one 616 88.4
One to four times 81 11.3
Five or more times 3 0.2

Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat? (on a daily basis among all respondents)

Less than one 191 25.9
One to four times 519 72.8
Five or more times 12 1.3

Module 5: Alcohol Consumption

(

During the past month, have you had at least one drink of any alcoholic beverage such as beer, wine, wine coolers, or liquor? (among all respondents)

> Yes 294 42.3 No 446 57.7

During the past month, how many days per month did you drink any alcoholic beverages, on the average? (among all respondents)

> None 446 58.5 One to five 195 26.4 Six to ten 46 7.5 11 to 20 15 3.1 21 to 29 12 2.0 30 14 2.5

Module 5: Alcohol Consumption

%

A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. On the days when you drank, about how many drinks did you drink on the average? (among all respondents)

Don't drink	446	59.3
One drink	100	12.5
Two drinks	88	13.7
Three drinks	29	4.0
Four drinks	22	4.1
Five drinks	9	1.5
More than five drinks	24	4.9

Considering all types of alcoholic beverages, how many times during the past month did you have five or more drinks on an occasion? (among all respondents)

> One or more 74 13.6 None 657 86.4

During the past month, how many times have you driven when you've had perhaps too much to drink? (among all respondents)

One or more 17 3.2 None 717 96.8

Module 6: Firearms

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Are any firearms now kept in or around your home? Include those kept in a garage, outdoor storage area, car, truck, or other motor vehicle. (among all respondents; using household weighting)

Yes 300 41.6 No 412 58.4

Are any of the firearms handguns, such as pistols or revolvers? (among respondents reporting firearms ownership; using household weighting)

Yes 154 52.4 No 136 47.6

Are any of the firearms long guns, such as rifles or shotguns? (among respondents reporting firearms ownership; using household weighting)

Yes 279 95.2 No 15 4.8

Module 6: Firearms

What is the main reason that there are firearms in or around your home? (among respondents reporting firearms ownership; using household weighting)

Hunting or sport 226 75.4

Protection 22 7.5

Work 10 3.4

Some other reason 41 13.7

Is there a firearm in or around your home that is now both loaded and unlocked? (among respondents reporting firearms ownership using household weighting)

> Yes 35 12.5 No 257 87.5

During the last 30 days, have you carried a loaded firearm on your person, outside of the home for protection against people? (among respondents reporting firearms ownership, excluding job-related requirements)

> Yes 8 2.7 No 291 97.3

During the last 30 days, have you driven or been a passenger in a motor vehicle in which you knew there was a loaded firearm? (among respondents reporting firearms ownership)

Yes 21 6.3 No 278 93.7

During the last 12 months, have you confronted another person with a firearm, even if you did not fire it, to protect yourself, your property, or someone else? (among respondents reporting firearms ownership)

> Yes 2 0.8 No 297 99.2

In the past three years, have you attended a firearm safety workshop, class, or clinic? (among respondents reporting firearms ownership)

Yes 29 11.0 No 270 89.0

Do any of the firearms kept in or around your home belong to you, personally? (among respondents owning firearms)

Yes 166 63.3 No 132 36.7

Module 7: Violence and Crime	n
How afraid are you to leave your home at n	iaht2

How afraid are you to leave your home at night? (among all respondents)

Very afraid	12	1.4
Somewhat afraid	19	2.2
A little afraid	69	8.7
Not afraid	635	87.6

When was the last time you saw a violent crime in your neighborhood (someone hurting or trying to hurt someone else)? (among all respondents)

Within the past week	3	0.6
Within the past month	5	0.6
Within the past year	11	1.6
One or more years ago	54	7.4
Never	653	80 8

During the past year have you known or seen anyone who was beaten or otherwise hurt by their husband, wife, boyfriend, or girlfriend? (among all respondents)

Yes 102 14.0 No 633 86.0

RISK FACTOR TABLES Definitions

Number At Risk (Unweighted): The raw number of respondents who reported being at risk for the defined health risk behavior.

Percent Subpop. at Risk (Weighted): Percentage of Sumner County residents at risk for the defined health risk behavior. The data are weighted to more closely resemble the characteristics of the population of Sumner County (See interpretation of results for more information on the weighting procedure).

95% CI: Confidence intervals represent statistically derived ranges around the estimated percent at risk (estimated because the entire population of the county was not interviewed). The true percentage in the population (the value that would have been obtained if everyone in the county had been interviewed) is 95% likely to lie within the confidence interval limit. In the example below, 12% represents the best estimate of the frequency of the characteristic in the population. Almost certainly (i.e., only 5% chance of being wrong) the true value for the population lies between 10 and 14. The certainty of the estimate (how narrow the confidence limits are) depends on the number of persons in the survey and the number at risk.

Table A: Example

Tuble 11. Example			
Subpopulation	Number At Risk	Percent Subpop. at Risk	95% CI
Total	n 113	% 12	10 - 14
Age Group			
18-24	3	5	0 - 11
25-34	5	5	0 - 10
35-44	8	3	1 - 7
45-54	22	15	9 - 22
55-64	16	17	9 - 26
65-74	26	22	14 - 30
75 +	33	30	22 - 40

Table A: Fair or Poor General Health*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
T .4.1			
Total Total	136	17%	14 - 20
Age Group			
18-24	1	3%	0 - 10
25-34	11	10%	3 - 17
35-44	19	11%	5 - 16
45-54	18	12%	6 - 17
55-64	18	19%	10 - 28
65-74	32	36%	25 - 47
75+	37	39%	27 - 50
Gender			
Male	42	16%	11 - 21
Female	94	18%	15 - 22
Education			
< H.S. Grad	26	28%	15 - 41
High School Grad	71	21%	16 - 25
Some College	29	12%	7 - 16
College Graduate	9	10%	2 - 17
Income			
\$0-\$9,999	10	24%	9 - 39
\$10,000-\$19,999	26	34%	22 - 46
\$20,000-\$34,999	40	22%	15 - 30
\$35,000-\$49,999	15	10%	5 - 16
\$50,000+	11	7%	2 - 12
Marital Status			
Married	71	16%	12 - 20
Divorced/Separated	19	17%	10 - 25
Widowed	35	35%	25 - 46
Never Mar./Unmar. Couple	10	11%	3 - 20
Employment			
Employed for wages	41	10%	7 - 14
Self employed	7	11%	2 - 19
Not employed	27	18%	11 - 25
Retired	61	35%	28 - 43
Other			
Limiting pain in the last 30 days	63	33%	24 - 42
14+ of last 30 days sad	26	30%	19 - 41
14+ of last 30 days anxious	34	24%	16 - 32
Couldn't see doctor due to cost	25	34%	22 - 45
Diabetes	27	39%	20 - 59
High blood pressure	65	25%	19 - 32
Overweight	85	18%	14 - 22
High cholesterol	49	27%	19 - 34

^{*}Respondents who report their health in general as fair or poor (among all respondents)

Table B: Lacked Health Care Coverage*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	64	8%	6 - 11
Age Group			
18-24	8	17%	4 - 31
25-34	15	11%	5 - 18
35-44	16	9%	5 - 14
45-54	16	11%	4 - 17
55-64	8	8%	2 - 14
75+	1	1%	0 - 2
Gender			
Male	19	7%	4 - 11
Female	45	9%	6 - 12
Education			
< H.S. Grad	10	13%	4 - 23
High School Grad	28	8%	4 - 11
Some College	20	10%	5 - 15
College Graduate	6	3%	0 - 5
Income			
\$0-\$9,999	9	32%	13 - 52
\$10,000-\$19,999	14	19%	9 - 29
\$20,000-\$34,999	21	10%	5 - 16
\$35,000-\$49,999	4	3%	0 - 6
\$50,000+	5	6%	0 - 12
Marital Status			
Married	26	6%	3 - 8
Divorced/Separated	21	22%	13 - 31
Widowed	4 12	4 % 17 %	0 - 8 6 - 28
Never Mar./Unmar. Couple	12	17 70	0 - 20
Employment	26	0.0/	6 10
Employed for wages	36 7	9% 10%	6 - 12 2 - 19
Self employed Not employed	, 16	16%	7 - 25
Retired	4	1%	0 - 3
Other	•	1 70	0 0
Limiting pain in the last 30 days	15	6%	3 - 9
14+ of last 30 days sad	15	21%	9 - 33
14+ of last 30 days anxious	26	20%	12 - 28
Couldn't see doctor due to cost	23	27%	17 - 38
Diabetes	1	1%	0 - 4
High blood pressure	10	5%	1 - 9
Lack mammogram	14	13%	6 - 20
Lack both mam. and CBE	15	10%	5 - 15
Lack pap smear	10	15%	6 - 24
Current smoking	30	15%	9 - 21
Male use of smokeless tobacco	4	11%	0 - 25
Overweight	30	8%	4 - 11
High cholesterol	5	2%	0 - 5
Have a child at home	35	13%	8 - 18

^{*}Respondents reporting no health insurance of any kind at the time of the survey (among all respondents)

Table C: Unable to See a Doctor Due to Cost in Past 12 Months*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	75	10%	7 - 12
	75	10 /6	7 - 12
Age Group	4	0.0/	0 17
18-24 25-34	4 18	8% 13%	0 - 17 7 - 20
35-44	23	14%	9 - 20
45-54	14	8%	4 - 12
55-64	5	5%	0 - 10
65-74	8	8%	2 - 15
75+	3	3%	0 - 6
Gender			
Male	17	6%	3 - 9
Female	58	13%	9 - 16
	00	10 70	0 .0
Education < H.S. Grad	11	17%	7 - 27
	14 41	17%	7 - 27 8 - 16
High School Grad Some College	16	7%	3 - 10
College Graduate	4	3%	0 - 6
-	4	J /0	0 - 0
Income	7	040/	0 40
\$0-\$9,999	7 16	24 % 25 %	6 - 42
\$10,000-\$19,999			13 - 36
\$20,000-\$34,999	26 10	13 % 6 %	7 - 18
\$35,000-\$49,999 \$50,000+	3	3%	2 - 9 0 - 6
	3	3 /0	0 - 0
Marital Status	40	100/	7 10
Married	49 18	10 % 17 %	7 - 13 9 - 25
Divorced/Separated Widowed	5	7%	9 - 25 0 - 14
Never Mar./Unmar. Couple	3	4%	0 - 14
·	3	7 70	0-0
Employment	40	400/	7 40
Employed for wages	43	10%	7 - 13
Self employed	3	5%	0 - 10
Not employed Retired	16 12	14 % 6 %	7 - 21 3 - 10
	12	0 70	3 - 10
Other		400/	40.00
Limiting pain in the last 30 days	37	19%	12 - 26
14+ of last 30 days sad	17	23%	12 - 34
14+ of last 30 days anxious	30 35	21 % 19 %	14 - 29
Fair or poor health	25 8	19%	11 - 26 3 - 23
Diabetes High blood pressure	8 22	10%	3 - 23 6 - 14
High blood pressure Current smoking	37	10%	12 - 25
Overweight	50	11%	8 - 14
High cholesterol	17	9%	5 - 14
=			
No health insurance	23	32%	19 - 45

^{*}Respondents who were unable to see a doctor because of the cost (among all respondents)

Table D: No Regular Health Care Provider*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Tatal			
Total Total	55	7%	5 - 9
Age Group		. ,,	
18-24	5	7%	0 - 14
25-34	12	12%	5 - 20
35-44	12	6%	2 - 10
45-54	13	8%	4 - 13
55-64	7	7%	1 - 13
65-74	3	4%	0 - 9
75+	3	5%	0 - 11
Gender			
Male	35	12%	8 - 16
Female	20	3%	2 - 5
Education			
< H.S. Grad	10	13%	4 - 22
High School Grad	24	7%	4 - 10
Some College	18	9%	4 - 13
College Graduate	3	2%	0 - 4
Income			
\$0-\$9,999	5	23%	4 - 42
\$10,000-\$19,999	10	14%	5 - 23
\$20,000-\$34,999	19	9%	5 - 13
\$35,000-\$49,999	9	7%	2 - 11
\$50,000+	5	4%	0 - 8
Marital Status			
Married	26	6%	4 - 9
Divorced/Separated	14	15%	7 - 23
Widowed	4	7%	0 - 14
Never Mar./Unmar. Couple	11	10%	4 - 16
Employment			
Employed for wages	38	9%	6 - 12
Self employed	5	8%	1 - 16
Not employed	6	5%	1 - 10
Retired	6	4%	0 - 7
Other		201	
Limiting pain in the last 30 days	10	6%	2 - 10
14+ of last 30 days sad	8	13%	4 - 21
14+ of last 30 days anxious	13	11%	4 - 17
Couldn't see doctor due to cost	9	14%	5 - 22
Diabetes	4	6% 7 %	0 - 12
High blood pressure	12 23	7% 11%	3 - 10 6 17
Current smoking Male use of smokeless tobacco	23 9	11 % 17 %	6 - 17 4 31
Overweight	33	8%	4 - 31 5 - 11
High cholesterol	33 6	4%	1-7
No health insurance	17	25%	12 - 37
Chronic drinking	4	18%	0 - 37
	-	10 /0	

^{*}Respondents who reported that there is not one particular doctor or health professional that they usualy go to when in need of routine medical care (among all respondents)

Table E: Hypertension*

Number % Subpop. 95% CI Subpopulation at Risk at Risk **Total** 31% Total 228 27 - 35 Age Group 7% 0 - 14 18-24 4 25-34 12 23% 5 - 40 24% 17 - 32 35-44 35 45-54 45 29% 20 - 37 55-64 36 37% 27 - 48 65-74 47 51% 40 - 62 75+ 49 55% 43 - 66 Gender 78 33% Male 26 - 41 Female 150 29% 25 - 33 Education < H.S. Grad 29 42% 22 - 62 37% High School Grad 117 31 - 43Some College 55 23% 17 - 29 College Graduate 27 23% 15 - 32 Income 12 30% \$0-\$9,999 13 - 48 \$10,000-\$19,999 24 31% 19 - 43 \$20,000-\$34,999 61 38% 27 - 48 \$35,000-\$49,999 35 25% 17 - 33 \$50,000+ 22% 15 - 29 37 **Marital Status** Married 147 34% 28 - 39 9 - 24 Divorced/Separated 16% 18 38 - 60 Widowed 47 49% 6 - 22 Never Mar./Unmar. Couple 14 14% **Employment** Employed for wages 89 25% 19 - 32 Self employed 16 28% 15 - 41 Not employed 37 28% 19 - 37 Retired 85 48% 40 - 57 Other 42% 33 - 50 Any activity limitation 67 Limiting pain in the last 30 days 72 44% 33 - 55 37 - 59 14+ of last 30 days pain 47 48% 14+ of last 30 days sad 33 47% 33 - 60 14+ of last 30 days anxious 46 37% 27 - 47 Fair or poor health 65 46% 36 - 55 22 32% 20 - 44 Couldn't see doctor due to cost Diabetes 35 67% 49 - 84 High blood pressure 228 100% 100 - 100 41 29% 17 - 40 Current smoking No health insurance 10 19% 6 - 33

Table F: High Blood Cholesterol*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	183	34%	29 - 38
Age Group			
18-24	1	5%	0 - 14
25-34	7	15%	4 - 26
35-44	27	31%	21 - 42
45-54	46	34%	25 - 44
55-64	39	42%	31 - 54
65-74	34	44 %	32 - 57
75+	29	38%	26 - 51
Gender			
Male	61	32%	25 - 40
Female	122	35%	29 - 40
Education			
< H.S. Grad	23	47%	32 - 63
High School Grad	84	39%	32 - 46
Some College	50	27%	19 - 34
College Graduate	24	23%	14 - 33
Income			
\$0-\$9,999	8	28%	8 - 47
\$10,000-\$19,999	21	47%	30 - 64
\$20,000-\$34,999	42	35%	26 - 45
\$35,000-\$49,999	31	27%	18 - 37
\$50,000+	39	29%	20 - 38
Marital Status			
Married	124	35%	30 - 41
Divorced/Separated	22	31%	18 - 43
Widowed	28	40%	27 - 53
Never Mar./Unmar. Couple	7	13%	1 - 25
Employment			
Employed for wages	76	30%	23 - 36
Self employed	12	28%	12 - 43
Not employed	25	26%	16 - 36
Retired	69	45%	36 - 54
Other			
Limiting pain in the last 30 days	58	41%	31 - 50
14+ of last 30 days sad	22	43%	27 - 60
14+ of last 30 days anxious	41	42%	30 - 54
Fair or poor health	49	51%	40 - 62
Couldn't see doctor due to cost	17	38%	22 - 55
Diabetes	18	32%	18 - 47
High blood pressure	87	47%	39 - 55
Overweight	122	37%	31 - 43

^{*}Respondents who have had their blood cholesterol checked and been told that they have high blood cholesterol (among respondents reporting having their blood cholesterol checked)

^{*}Respondents who have had their blood pressure checked and been told that they have high blood pressure (among all respondents)

Table G: Diabetes Mellitus*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	56	9%	5 - 13
	30	9 %	5 - 13
Age Group 18-44	10	6%	0 - 13
45-64	14	5%	2 - 8
65+	32	19%	13 - 26
Gender			
Male	20	10%	3 - 17
Female	36	8%	5 - 10
Education			
< H.S. Grad	10	23%	0 - 46
High School Grad	27	9%	5 - 12
Some College	12	5%	2 - 8
College Graduate	7	7%	2 - 13
Income			
\$0-\$9,999	5	19%	2 - 36
\$10,000-\$19,999	8	11%	3 - 20
\$20,000-\$34,999	15	14%	2 - 25
\$35,000-\$49,999	6	5%	1 - 10
\$50,000+	6	3%	0 - 6
Marital Status			
Married	35	10%	5 - 15
Divorced/Separated	10	11%	4 - 18
Widowed	9	10%	3 - 16
Never Mar./Unmar. Couple	2	1%	0 - 3
Employment			
Employed for wages	17	7%	1 - 13
Self employed	3	4%	0 - 8
Not employed Retired	10 26	8% 16%	3 - 13 10 - 23
	20	10 70	10 - 23
Other	00	400/	5 04
Limiting pain in the last 30 days	20	18%	5 - 31
14+ of last 30 days sad	12	15%	6 - 24
14+ of last 30 days anxious Fair or poor health	11 27	8% 20%	3 - 13 13 - 28
High blood pressure	35	19%	9 - 29
Male use of smokeless tobacco	2	24%	0 - 58
Overweight	42	12%	6 - 17
High cholesterol	18	8%	4 - 12

^{*}Respondents ever told they had diabetes, excluding diabetes limited to pregnancy only (among all respondents)

Table H: Sedentary Lifestyle*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	436	60%	56 - 65
Age Group			
18-24	20	39%	23 - 55
25-34	46	51%	38 - 65
35-44	92	67%	58 - 75
45-54	93	64%	55 - 72
55-64	69	70%	60 - 79
65-74	52	56%	44 - 68
75+	64	73%	62 - 84
Gender			
Male	167	65%	59 - 72
Female	269	56%	51 - 61
Education			
< H.S. Grad	48	69%	54 - 84
High School Grad	192	63%	57 - 69
Some College	131	57%	50 - 64
College Graduate	63	52%	42 - 62
Income			
\$0-\$9,999	27	83%	66 - 99
\$10,000-\$19,999	47	64%	52 - 77
\$20,000-\$34,999	114	65%	56 - 74
\$35,000-\$49,999	68	50%	40 - 59
\$50,000+	85	56%	47 - 65
Marital Status	057	50 0/	F4 C4
Married	257 67	59 % 75 %	54 - 64
Divorced/Separated Widowed	67 65	75% 67%	65 - 84 55 - 79
Never Mar./Unmar. Couple	42	53%	39 - 66
·	42	33 %	39 - 00
Employment			
Employed for wages	223	60%	54 - 66
Self employed	31	61%	46 - 76
Not employed	67	57%	46 - 67
Retired	113	63%	55 - 72
Other			
Limiting pain in the last 30 days	114	68%	59 - 77
14+ of last 30 days sad	46	63%	50 - 77
14+ of last 30 days anxious	80	65%	55 - 74
Fair or poor health	94	74%	65 - 83
Diabetes	39	73%	57 - 89
High blood pressure	140	67%	59 - 74
Current smoking	127	71%	63 - 80
Overweight	248	63%	57 - 68
High cholesterol	111	65%	57 - 73
No health insurance	45	76%	64 - 88

^{*}Respondents who report leisure time exercise less than 20 minutes three days per week (among all respondents)

Table I: No Regular Physical Activity*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Tatal			
Total Total	585	81%	78 - 84
Age Group			
18-24	35	69%	53 - 85
25-34	83	84%	75 - 92
35-44	121	87%	81 - 93
45-54	121	82%	76 - 88
55-64	87	85%	77 - 93
65-74	64	69%	58 - 80
75+	74	85%	76 - 94
Gender			
Male	209	82%	76 - 87
Female	376	80%	76 - 84
Education			
< H.S. Grad	63	88%	80 - 97
High School Grad	250	82%	77 - 87
Some College	178	78%	72 - 85
College Graduate	92	78%	70 - 86
Income			
\$0-\$9,999	31	98%	93 - 100
\$10,000-\$19,999	58	81%	70 - 91
\$20,000-\$34,999	152	86%	81 - 92
\$35,000-\$49,999	98	68%	59 - 77
\$50,000+	119	77%	70 - 85
Marital Status			
Married	361	81%	77 - 85
Divorced/Separated	81	89%	82 - 95
Widowed	77	83%	74 - 92
Never Mar./Unmar. Couple	60	74%	61 - 87
Employment			
Employed for wages	307	83%	79 - 88
Self employed	39	71%	57 - 86
Not employed	101	85%	77 - 93
Retired	136	76%	68 - 84
Other			
Limiting pain in the last 30 days	145	84%	78 - 91
14+ of last 30 days sad	66	96%	92 - 100
14+ of last 30 days anxious	107	87%	81 - 94
Fair or poor health	115	90%	85 - 96
Diabetes	50	88%	78 - 99
High blood pressure	186	86%	81 - 91
Current smoking	155	88%	83 - 93
Overweight	339	83%	79 - 87
High cholesterol	148	87%	81 - 93
No health insurance	54	89%	80 - 98
More than two hours of TV	94	85%	78 - 92

^{*}Respondents who reported they do not engage in physical activity at least 5 times a week for at least 30 minutes each time (among all respondents)

Table J: Failed to Always Use Safety Belt*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total		4=0/	
Total	337	47%	43 - 52
Age Group			
18-24	27	59%	44 - 74
25-34	57	59%	46 - 72
35-44	65	44%	36 - 53
45-54	78	51%	42 - 59
55-64	47	45%	35 - 56
65-74	32	34%	24 - 45
75+	31	36%	25 - 48
Gender			
Male	142	55%	48 - 62
Female	195	40%	35 - 45
Education			
< H.S. Grad	33	50%	32 - 68
High School Grad	158	53%	46 - 59
Some College	96	43%	36 - 51
College Graduate	49	38%	29 - 48
Income			
\$0-\$9,999	12	31%	13 - 49
\$10,000-\$19,999	32	42%	30 - 55
\$20,000-\$34,999	92	53%	43 - 63
\$35,000-\$49,999	71	49%	40 - 58
\$50,000+	70	46%	37 - 55
Marital Status			
Married	210	47%	42 - 52
Divorced/Separated	42	44%	33 - 55
Widowed	36	33%	23 - 43
Never Mar./Unmar. Couple	47	62%	49 - 74
Employment			
Employed for wages	183	50%	44 - 56
Self employed	37	66%	52 - 80
Not employed	55	51%	41 - 61
Retired	60	32%	25 - 40
		02 //	
Other	40	EE 0/	40 67
14+ of last 30 days sad	43	55 %	42 - 67
14+ of last 30 days anxious	71 122	53 %	44 - 63
Have a child at home	123	52 %	44 - 60 54 - 79
Binge drinking Chronic drinking	48 15	66 % 79 %	54 - 78 59 - 99
*Pospondents reporting that they a			

^{*}Respondents reporting that they do not always use a seat belt (among all respondents)

Table K: Child Aged 0 to 15 Years Failed to Always Use Safety Belt*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	72	24%	19 - 30
Age Group of Oldest Child			
1-4	1	2%	0 - 7
5-9	13	18%	9 - 28
10-15	58	43%	34 - 52
Education of Adult Respond			
< H.S. Grad	6	25%	5 - 46
High School Grad	33	29%	20 - 38
Some College	16	16%	8 - 24
College Graduate	17	30%	17 - 44
Income of Household			
\$0-\$9,999	2	11%	0 - 29
\$10,000-\$19,999	5	35%	3 - 66
\$20,000-\$34,999	12	12%	5 - 19
\$35,000-\$49,999	17	26%	14 - 37
\$50,000+	27	33%	21 - 44
Marital Status of Adult Response	ondent		
Married	53	24%	18 - 31
Divorced/Separated	9	23%	8 - 38
Never Mar./Unmar. Couple	9	24%	6 - 42

^{*}Oldest child between the ages of 0-15 is not always restrained by safety seat or seat belt (among children ages 0-15, weighted for children ages 0-15).

Table L: Smokes Cigarettes*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total Total	187	25%	21 - 29
Age Group			
18-24	12	21%	9 - 34
25-34	37	40%	25 - 55
35-44	56	39%	31 - 48
45-54	43	24%	17 - 31
55-64	26	22%	13 - 31
65-74	6	6%	1 - 11
75+	7	6%	1 - 10
Gender			
Male	75	29%	21 - 36
Female	112	22%	18 - 26
Education			
< H.S. Grad	26	41%	21 - 61
High School Grad	84	27%	22 - 33
Some College	56	22%	16 - 27
College Graduate	20	14%	7 - 20
Income			
\$0-\$9,999	14	45%	25 - 65
\$10,000-\$19,999	20	26%	15 - 37
\$20,000-\$34,999	57	32%	21 - 43
\$35,000-\$49,999	34	25%	17 - 33
\$50,000+	31	19%	12 - 26
Marital Status			
Married	98	23%	18 - 28
Divorced/Separated	51	53%	42 - 65
Widowed	15	15%	7 - 23
Never Mar./Unmar. Couple	21	26%	14 - 37
Employment			
Employed for wages	127	33%	27 - 40
Self employed	15	25%	13 - 38
Not employed	29	25%	16 - 33
Retired	16	7%	3 - 11
Other			
Limiting pain in the last 30 days	50	31%	19 - 43
14+ of last 30 days sad	28	34 %	22 - 46
14+ of last 30 days anxious	50	39%	30 - 49
Couldn't see doctor due to cost	37	49%	37 - 62
Diabetes	11	34%	6 - 61
High blood pressure	41	23%	13 - 33
Male use of smokeless tobacco	7	36%	5 - 67
Overweight	90	24%	18 - 30
No health insurance	30	44%	29 - 59
Have a child at home	82	33%	25 - 42
Binge drinking	30	42%	29 - 55
Chronic drinking	10	53%	27 - 79

^{*}Respondents who report smoking cigarettes some days or all days (among all respondents).

Table M: Smokeless Tobacco Use Among Males*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	33	23%	14 - 33
Age Group			
18-24	7	50%	21 - 79
25-34	9	54%	22 - 85
35-44	9	20%	7 - 32
45-54	4	6%	0 - 13
55-64	3	14%	0 - 29
75+	1	7%	0 - 22
Education			
< H.S. Grad	6	56%	17 - 95
High School Grad	14	21%	10 - 32
Some College	10	18%	7 - 29
College Graduate	3	12%	0 - 26
Income			
\$0-\$9,999	1	24%	0 - 77
\$10,000-\$19,999	1	4%	0 - 14
\$20,000-\$34,999	10	30%	6 - 54
\$35,000-\$49,999	5	14%	2 - 27
\$50,000+	12	27%	13 - 41
Marital Status			
Married	21	23%	11 - 36
Divorced/Separated	4	11%	0 - 22
Widowed	1	16%	0 - 53
Never Mar./Unmar. Couple	7	32%	10 - 54
Employment			
Employed for wages	25	31%	17 - 45
Self employed	5	19%	2 - 36
Not employed	1	11%	0 - 34
Retired	2	6%	0 - 14
Other			
Limiting pain in the last 30 days	9	45%	17 - 74
14+ of last 30 days sad	3	16%	0 - 36
14+ of last 30 days anxious	5	16%	1 - 30
Diabetes	2	49%	0 - 100
High blood pressure	- 14	32%	11 - 53
Overweight	26	26%	14 - 37
High cholesterol	7	14%	3 - 25
No health insurance	4	33%	0 - 67
Have a child at home	19	39%	20 - 57
Binge drinking	13	40%	20 - 59
Chronic drinking	4	46%	4 - 88
C. Morito drinking		T U /U	- - - 00

^{*}Males who reported currently using smokeless tobacco (among all male respondents).

Table N: Overweight*
BMI >= 27.8 (M) and >= 27.3 (F)

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total	000	40.0/	00 47
Total	296	43%	38 - 47
Age Group			
18-24	13	27%	13 - 42
25-34	34	41%	25 - 56
35-44	54	40%	31 - 49
45-54	81	60 %	51 - 68
55-64 65-74	42 46	45% 48%	34 - 56
75+	46 26	46 % 28 %	37 - 60 17 - 38
	20	20 /0	17 - 30
Gender	400	470/	40 55
Male	120	47%	40 - 55
Female	176	38%	33 - 43
Education			
< H.S. Grad	36	56%	38 - 74
High School Grad	125	41%	35 - 48
Some College	88	40%	33 - 47
College Graduate	45	40%	30 - 50
Income			
\$0-\$9,999	14	40%	20 - 60
\$10,000-\$19,999	37	57%	44 - 70
\$20,000-\$34,999	66	38%	28 - 49
\$35,000-\$49,999	51	38%	29 - 47
\$50,000+	66	45%	36 - 54
Marital Status			
Married	196	46%	41 - 52
Divorced/Separated	37	37%	27 - 48
Widowed	34	37%	26 - 48
Never Mar./Unmar. Couple	26	29%	18 - 41
Employment			
Employed for wages	151	43%	36 - 50
Self employed	29	49%	34 - 64
Not employed	44	40%	29 - 51
Retired	70	40%	32 - 49
Other			
Limiting pain in the last 30 days	88	56%	46 - 66
14+ of last 30 days sad	40	54%	41 - 67
14+ of last 30 days anxious	64	49%	39 - 59
Fair or poor health	65	50%	40 - 60
Couldn't see doctor due to cost	35	48%	35 - 61
Diabetes	37	74%	59 - 90
High blood pressure	126	61%	53 - 70
Male use of smokeless tobacco	17	58%	33 - 82
High cholesterol	92	54%	46 - 62
Chronic drinking	11	51%	24 - 78

^{*}Body mass index >= 27.8 for males and >= 27.3 for females.

Table O: Overweight or Obese* BMI >= 25

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	428	63%	59 - 67
Age Group	120	00 70	00 01
18-24	20	42%	26 - 58
25-34	57	65%	53 - 77
35-44	84	65%	57 - 74
45-54	96	69%	61 - 77
55-64	60	64%	54 - 75
65-74	60	66%	55 - 77
75+	51	59%	48 - 71
Gender			
Male	191	74%	68 - 80
Female	237	52%	47 - 57
Education			
< H.S. Grad	45	66%	50 - 81
High School Grad	179	62%	56 - 69
Some College	130	60%	53 - 67
College Graduate	71	66%	57 - 75
Income			
\$0-\$9,999	20	61%	41 - 81
\$10,000-\$19,999	49	72%	61 - 84
\$20,000-\$34,999	103	61%	52 - 70
\$35,000-\$49,999	84	65%	56 - 73
\$50,000+	93	65%	56 - 73
Marital Status			
Married	275	66%	61 - 71
Divorced/Separated	58	61%	50 - 72
Widowed	52	58%	47 - 70
Never Mar./Unmar. Couple	39	48%	35 - 62
Employment			
Employed for wages	219	64 %	58 - 70
Self employed	39	70%	56 - 84
Not employed	58	52%	42 - 63
Retired	110	65%	57 - 73
Other			
Limiting pain in the last 30 days	117	70%	61 - 79
14+ of last 30 days sad	55	72%	60 - 84
14+ of last 30 days anxious	87	69%	60 - 78
Couldn't see doctor due to cost	50	72%	61 - 83
Diabetes	42	81%	67 - 94
High blood pressure	166 26	82%	76 - 88
Male use of smokeless tobacco	26 122	82 % 73 %	65 - 98 66 - 81
High cholesterol Chronic drinking	14	73 % 73 %	51 - 95
- Chilothic driftking	17	1 3 /0	51-85

^{*}Overweight or obese by National Heart, Lung, and Blood Institute (NHLBI) standard: body mass index >=25 (among all respondents).

Table P: Obese* BMI >= 30

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	180	26%	21 - 30
Age Group			
18-24	5	9%	1 - 17
25-34	15	22%	5 - 40
35-44	36	27%	18 - 35
45-54	54	39%	29 - 48
55-64	28	30%	20 - 40
65-74	29	32%	21 - 42
75+	13	13%	6 - 21
Gender			
Male	72	29%	22 - 37
Female	108	22%	18 - 26
Education			
< H.S. Grad	25	44%	23 - 64
High School Grad	76	24%	18 - 29
Some College	52	24%	17 - 30
College Graduate	27	23%	14 - 32
Income			
\$0-\$9,999	10	30%	11 - 49
\$10,000-\$19,999	17	27%	15 - 39
\$20,000-\$34,999	45	29%	18 - 40
\$35,000-\$49,999	36	24%	16 - 31
\$50,000+	34	21%	14 - 28
Marital Status			
Married	128	30%	25 - 36
Divorced/Separated	20	19%	11 - 27
Widowed	20	23%	13 - 33
Never Mar./Unmar. Couple	10	8%	2 - 13
Employment			
Employed for wages	93	27%	20 - 34
Self employed	17	26%	14 - 38
Not employed	27	25%	15 - 34
Retired	41	23%	16 - 30
Other			
Limiting pain in the last 30 days	64	43%	31 - 54
14+ of last 30 days sad	34	47%	34 - 61
14+ of last 30 days anxious	44	34%	24 - 44
Fair or poor health	46	35%	26 - 45
Couldn't see doctor due to cost	28	38%	26 - 51
Diabetes	30	64%	44 - 83
High blood pressure	92	47%	38 - 57
Male use of smokeless tobacco	12	46%	18 - 74
High cholesterol	62	37%	29 - 45

^{*}Obese by National Heart, Lung, and Blood Institute (NHLBI) standard: Body mass index > or = 30 (among all respondents).

Table Q: Lacked Recent Mammogram*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	101	31%	26 - 36
Age Group	101	0170	20 00
40-49	43	47%	37 - 58
50-69	30	22%	14 - 30
70+	28	26%	17 - 36
Education			
< H.S. Grad	10	32%	14 - 50
High School Grad	51	34%	26 - 42
Some College	33	33%	23 - 42
College Graduate	7	16%	3 - 28
Income			
\$0-\$9,999	10	55%	28 - 81
\$10,000-\$19,999	15	33%	18 - 48
\$20,000-\$34,999	19	31%	18 - 43
\$35,000-\$49,999	16	29%	16 - 42
\$50,000+	15	29%	16 - 43
Marital Status			
Married	62	31%	24 - 37
Divorced/Separated	9	22%	8 - 36
Widowed	27	36%	24 - 47
Never Mar./Unmar. Couple	3	43%	0 - 91
Employment			
Employed for wages	40	34%	25 - 43
Self employed	9	47%	21 - 72
Not employed	19	29%	17 - 42
Retired	32	26%	17 - 34
Other			
14+ of last 30 days sad	15	44%	26 - 62
14+ of last 30 days anxious	19	39%	24 - 53
Fair or poor health	28	38%	26 - 50
Couldn't see doctor due to cost	14	45%	25 - 65
Current smoking	24	42%	28 - 56
Overweight	46	26%	19 - 33
High cholesterol	23	20%	12 - 28
No health insurance	14	82%	65 - 99

^{*}Female respondents aged 40 and older who had not had a mammogram within the past two years (among women ages 40 and older).

Table R: Lacked Recent Clinical Breast Exam*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	101	31%	26 - 37
Age Group			
40-49	28	28%	18 - 38
50-69	32	23%	16 - 31
70+	41	45%	34 - 56
Education			
< H.S. Grad	12	37%	18 - 56
High School Grad	55	38%	30 - 47
Some College	25	26%	16 - 35
College Graduate	9	16%	5 - 26
Income			
\$0-\$9,999	7	39%	12 - 65
\$10,000-\$19,999	16	39%	23 - 55
\$20,000-\$34,999	19	31%	19 - 43
\$35,000-\$49,999	16	27%	14 - 39
\$50,000+	10	20%	8 - 32
Marital Status			
Married	59	30%	23 - 36
Divorced/Separated	8	18%	6 - 31
Widowed	29	42%	30 - 54
Never Mar./Unmar. Couple	5	52%	5 - 99
Employment			
Employed for wages	32	25%	17 - 33
Self employed	7	33%	10 - 57
Not employed	18	31%	18 - 45
Retired	43	38%	28 - 47
Other			
14+ of last 30 days sad	11	31%	14 - 49
14+ of last 30 days anxious	19	38%	23 - 52
Fair or poor health	38	54%	41 - 66
Couldn't see doctor due to cost	13	44%	23 - 65
Overweight	51	30%	22 - 37
High cholesterol	28	27%	18 - 37
No health insurance	9	48%	21 - 75

^{*}Female respondents who had not had a clinical breast exam within the past two years (among women ages 40 and older).

Table S: Lacked Both Clinical Breast Exam and Mammogram*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	139	43%	37 - 48
Age Group			
40-49	51	56%	45 - 67
50-69	42	30%	21 - 38
70+	46	47%	36 - 57
Education			
< H.S. Grad	16	46%	26 - 65
High School Grad	70	47%	39 - 56
Some College	40	42%	31 - 52
College Graduate	13	27%	13 - 41
Income			
\$0-\$9,999	11	60%	34 - 86
\$10,000-\$19,999	21	48%	32 - 64
\$20,000-\$34,999	28	46%	32 - 59
\$35,000-\$49,999	21	37%	23 - 50
\$50,000+	18	35%	21 - 49
Marital Status			
Married	81	41%	34 - 48
Divorced/Separated	14	34%	18 - 51
Widowed	38	51%	39 - 62
Never Mar./Unmar. Couple	6	74%	34 - 100
Employment			
Employed for wages	53	44%	35 - 53
Self employed	12	59%	35 - 84
Not employed	23	37%	24 - 51
Retired	50	41%	31 - 50
Other			
14+ of last 30 days sad	17	48%	29 - 66
14+ of last 30 days anxious	23	45%	30 - 60
Fair or poor health	47	64%	52 - 76
Diabetes	17	55%	36 - 74
High blood pressure	47	39%	30 - 48
Overweight	69	40%	32 - 48
High cholesterol	38	35%	25 - 45
No health insurance	15	85%	70 - 100

^{*}Female respondents aged 40 and older who had not had a clinical breast exam and a mammogram within the past two years (among women ages 40 and older).

Table T: Women with Hysterectomy*

,	Number	% Subpop.	
Subpopulation	at Risk	at Risk	95% CI
Total			
Total	166	31%	26 - 35
Age Group			
25-39	8	6%	2 - 11
40-49	34	32%	22 - 42
50-69	69	49%	40 - 57
70+	55	52%	42 - 62
Education			
< H.S. Grad	19	33%	19 - 47
High School Grad	83	36%	29 - 43
Some College	45	27%	20 - 35
College Graduate	19	22%	12 - 31
_			
Income	6	19%	3 - 34
\$0-\$9,999 \$10,000-\$19,999	28	44%	3 - 34 30 - 58
\$20,000-\$19,999	30	24%	16 - 33
\$35,000-\$49,999	24	22%	14 - 31
\$50,000+	27	29%	18 - 39
	21	25 70	10 - 33
Marital Status	400	24.0/	05 00
Married	100 22	31 % 35 %	25 - 36
Divorced/Separated		51%	21 - 48 40 - 62
Widowed Never Mar./Unmar. Couple	43 1	1%	0 - 4
	!	1 70	0 - 4
Employment			
Employed for wages	57	21%	16 - 26
Self employed	5	17%	2 - 33
Not employed	33	26%	17 - 35
Retired	71	58%	49 - 67
Other			
Limiting pain in the last 30 days	62	46%	37 - 56
14+ of last 30 days sad	22	34 %	20 - 48
14+ of last 30 days anxious	32	31%	21 - 41
Fair or poor health	48	49%	38 - 60
Diabetes	19	49%	30 - 67
High blood pressure	70	46%	37 - 54
Lack clinical breast exam	43	42%	32 - 53
Lack both mam. and CBE	55	36%	28 - 45
Overweight	90	36%	30 - 43
High cholesterol	66	54 %	45 - 64

^{*}Respondents who reported having had a hysterectomy (among women ages 18 and older).

Table U: Lacked Recent Pap Smear Test*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	78	25%	10 20
	70	25 %	19 - 30
Age Group		400/	
18-39	22	19%	11 - 27
40-49	22	35%	22 - 47
50-69	12	17%	7 - 26
70+	22	43%	27 - 59
Education			
< H.S. Grad	10	38%	16 - 60
High School Grad	33	26%	17 - 34
Some College	27	24%	15 - 33
College Graduate	8	15%	4 - 26
Income			
\$0-\$9,999	6	29%	5 - 54
\$10,000-\$19,999	8	28%	9 - 46
\$20,000-\$34,999	19	25%	14 - 36
\$35,000-\$49,999	15	20%	10 - 30
\$50,000+	11	18%	8 - 29
Marital Status			
Married	44	21%	15 - 27
Divorced/Separated	5	14%	2 - 27
Widowed	15	40%	23 - 57
Never Mar./Unmar. Couple	13	38%	19 - 58
Employment			
Employed for wages	38	24%	16 - 31
Self employed	5	21%	2 - 39
Not employed	14	20%	10 - 31
Retired	20	36%	22 - 50
Other			
14+ of last 30 days sad	8	28%	10 - 47
14+ of last 30 days anxious	16	30%	16 - 44
Fair or poor health	19	44%	27 - 60
Couldn't see doctor due to cost	12	31%	15 - 46
Diabetes	6	35%	7 - 62
High blood pressure	20	24%	14 - 35
Overweight	41	26%	19 - 34
High cholesterol	13	23%	10 - 36
No health insurance	10	30%	13 - 48
Binge drinking	8	53%	27 - 79
*Formula reasonandante with a utorine		a had not had	·

^{*}Female respondents with a uterine cervix who had not had a pap smear the past two years (among women ages 18 and older).

Table V: HIV*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Tatal			
Total Total	25	7%	2 - 12
	23	1 /0	2 - 12
Age Group		4.4.07	0 04
18-24	3	11%	0 - 24
25-34	6	15%	0 - 33
35-44	7	4%	1 - 7
45-54 55-64	5 4	3% 3%	0 - 5 0 - 6
55-64	4	3 %	0 - 6
Gender			
Male	9	10%	1 - 19
Female	16	4%	2 - 6
Education			
< H.S. Grad	2	23%	0 - 57
High School Grad	9	5%	1 - 9
Some College	9	5%	1 - 8
College Graduate	5	5%	0 - 10
Income			
\$0-\$9.999	1	3%	0 - 10
\$10,000-\$19,999	3	4%	0 - 10
\$20,000-\$34,999	6	12%	0 - 28
\$35,000-\$49,999	4	2%	0 - 5
\$50,000+	8	8%	2 - 14
Marital Status			
Married Married	14	6%	0 - 12
Divorced/Separated	5	4%	0 - 12
Widowed	2	6%	0 - 15
Never Mar./Unmar. Couple	4	11%	0 - 23
	-	1170	0 20
Employment		22/	
Employed for wages	20	9%	2 - 15
Self employed	2	4%	0 - 10
Not employed	1	1%	0 - 4
Retired	2	5%	0 - 12
Other			
Limiting pain in the last 30 days	5	15%	0 - 33
14+ of last 30 days sad	1	1%	0 - 2
14+ of last 30 days anxious	4	3%	0 - 6
Diabetes	2	40%	0 - 90
High blood pressure	8	14%	0 - 30
Current smoking	9	12%	0 - 26
Male use of smokeless tobacco	3	34%	0 - 67
Overweight	18	9%	2 - 17
High cholesterol	5	3%	0 - 6
Unsafe neighborhood	8	14%	0 - 30
Chronic drinking	2	24%	0 - 57
3+ adults in home	6	17%	0 - 34

^{*}Respondents younger than 65 with self-reported risk for HIV as medium or high (among respondents younger than 65)

Table W: Any Activity Limitation*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	141	17%	14 - 20
Age Group			
18-24	3	6%	0 - 13
25-34	12	10%	4 - 16
35-44	18	12%	6 - 18
45-54	14	7%	3 - 11
55-64	31	30%	20 - 40
65-74	31	31%	21 - 41
75+	32	31%	21 - 42
Gender			
Male	41	15%	10 - 19
Female	100	19%	15 - 22
Education			
< H.S. Grad	20	25%	13 - 38
High School Grad	67	18%	13 - 22
Some College	38	15%	10 - 19
College Graduate	16	13%	6 - 20
Income			
\$0-\$9,999	15	41%	22 - 61
\$10,000-\$19,999	25	32%	20 - 44
\$20,000-\$34,999	36	18%	11 - 24
\$35,000-\$49,999	23	16%	9 - 22
\$50,000+	13	8%	4 - 13
Marital Status			
Married	77	16%	13 - 20
Divorced/Separated	16	17%	8 - 25
Widowed	39	38%	27 - 49
Never Mar./Unmar. Couple	9	6%	2 - 11
Employment			
Employed for wages	33	8%	5 - 11
Self employed	14	22%	11 - 34
Not employed	36	27%	18 - 35
Retired	58	30%	23 - 37
Other			
Limiting pain in the last 30 days	84	41%	31 - 51
14+ of last 30 days sad	27	34%	22 - 46
14+ of last 30 days anxious	33	24%	16 - 32
Fair or poor health	70	51%	42 - 61
Couldn't see doctor due to cost	26	37%	25 - 49
Diabetes	25	36%	17 - 55
High blood pressure	63	23%	17 - 29
Lack clinical breast exam	29	28%	18 - 37
Lack both mam. and CBE	37	24%	16 - 31
	86	17%	
•	45	23%	16 - 30
Overweight High cholesterol	86	17%	14 - 21

^{*}Respondents who reported that they had any limitation in any activities due to any impairment or health problem (among all respondents).

Table X: 14+ Days in Pain Last Month*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	100	12%	9 - 14
Age Group			
18-24	2	4%	0 - 11
25-34	6	5%	0 - 9
35-44	19	11%	6 - 17
45-54	18	10%	5 - 14
55-64	17	16%	8 - 24
65-74 75+	16 22	18 % 25 %	9 - 26 14 - 35
	22	25 %	14 - 35
Gender	00	0.0/	5 40
Male	26	8%	5 - 12
Female	74	15%	11 - 18
Education			
< H.S. Grad	19	23%	11 - 35
High School Grad	45	13%	9 - 17
Some College	25	9%	5 - 12
College Graduate	11	8%	3 - 13
Income			
\$0-\$9,999	7	18%	4 - 32
\$10,000-\$19,999	17	19%	9 - 28
\$20,000-\$34,999	30	14%	9 - 19
\$35,000-\$49,999	13	7%	3 - 12
\$50,000+	13	8%	3 - 12
Marital Status			
Married	55	11%	8 - 14
Divorced/Separated	15	13%	6 - 20
Widowed	25	25%	16 - 35
Never Mar./Unmar. Couple	5	6%	0 - 12
Employment			
Employed for wages	31	7%	4 - 10
Self employed	10	17%	6 - 27
Not employed	22	16%	9 - 23
Retired	36	19%	13 - 25
Other			
14+ of last 30 days sad	28	34%	22 - 46
14+ of last 30 days anxious	31	20%	13 - 27
Fair or poor health	46	34%	25 - 44
Couldn't see doctor due to cost	20	25%	14 - 35
Diabetes	15	21%	7 - 34
High blood pressure	47	18%	13 - 24
Overweight	64	12%	9 - 15
High cholesterol	36	17%	11 - 23

they had pain that limited their activity (among all respondents).

Table Y: Any Pain in Last 30 Days*

Table Z: Sad, Blue, Depressed*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Γotal			
Total	182	24%	20 - 29
Age Group			
18-24	5	14%	2 - 26
25-34	18	25%	7 - 42
35-44	36	24%	17 - 32
45-54	39	21%	14 - 27
55-64	30	28%	19 - 38
65-74	23	26%	16 - 36
75+	31	34%	23 - 46
Gender			
Male	54	22%	15 - 30
Female	128	26%	22 - 30
Education			
=ducation < H.S. Grad	25	46%	25 - 66
High School Grad	25 87	46 % 26 %	21 - 31
Some College	40	26 % 15 %	10 - 19
College Graduate	30	24%	16 - 33
_	50	Z7 /0	10 - 00
ncome		240/	40 =0
\$0-\$9,999	10	31%	12 - 50
\$10,000-\$19,999	23	28%	17 - 40
\$20,000-\$34,999	49	28%	17 - 39
\$35,000-\$49,999	34	22%	14 - 29
\$50,000+	27	18%	11 - 26
Marital Status			
Married	107	24%	19 - 30
Divorced/Separated	28	26%	16 - 35
Widowed	35	39%	28 - 51
Never Mar./Unmar. Couple	11	15%	5 - 26
Employment			
Employed for wages	75	21%	14 - 27
Self employed	16	27%	14 - 40
Not employed	37	29%	20 - 38
Retired	53	29%	22 - 36
Other			
Any activity limitation	84	62%	53 - 72
14+ of last 30 days sad	43	51%	38 - 64
14+ of last 30 days anxious	58	40%	30 - 49
Fair or poor health	63	49%	39 - 59
Couldn't see doctor due to cost	37	50%	37 - 62
Sedentary Lifestyle	114	27%	21 - 34
Diabetes	20	49%	26 - 73
High blood pressure	72	35%	25 - 44
Overweight	117	27%	21 - 33
High cholesterol	58	30%	22 - 37
No health insurance	15	18%	8 - 28

^{*}Respondents reporting at least one day with pain out of the last 30 (among all respondents).

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	78	10%	7 - 12
Age Group			
18-24	5	9%	0 - 17
25-34	10	8%	3 - 14
35-44	19	10%	5 - 14
45-54	18	13%	6 - 19
55-64	3	2%	0 - 4
65-74	12	15%	6 - 23
75+	11	11%	4 - 18
Gender			
Male	22	8%	4 - 12
Female	56	11%	8 - 15
Education			
< H.S. Grad	12	16%	5 - 26
High School Grad	35	11%	7 - 14
Some College	18	8%	4 - 12
College Graduate	13	7%	3 - 12
Income			
\$0-\$9,999	11	41%	19 - 62
\$10,000-\$19,999	10	16%	6 - 27
\$20,000-\$34,999	23	11%	6 - 16
\$35,000-\$49,999	8	5%	1 - 8
\$50,000+	10	4%	1 - 7
Marital Status			
Married	36	7%	5 - 10
Divorced/Separated	20	20%	12 - 29
Widowed	14	21%	10 - 33
Never Mar./Unmar. Couple	8	9%	2 - 16
•	· ·	• 70	
Employed for wages	32	7%	4 - 9
Employed for wages Self employed	52 5	9%	4 - 9 1 - 17
	23	20%	11 - 17
Not employed Retired	23 17	11%	6 - 17
	17	11 /0	0 - 17
Other	40	04.0/	44 00
Limiting pain in the last 30 days	43	21%	14 - 28
14+ of last 30 days anxious	64	46%	36 - 56
Fair or poor health	26	18%	11 - 24
Couldn't see doctor due to cost	17 12	25% 17%	13 - 36
Diabetes	12 22	17%	5 - 29 0 - 21
High blood pressure	33	15% 13%	9 - 21
Current smoking	28 55	13 % 11 %	8 - 18 8 - 15
Overweight High cholesterol	55 22	11%	8 - 15 6 - 17
High cholesterol No health insurance	22 15	25%	11 - 39
*Respondents who reported 14 or n			

^{*}Respondents who reported 14 or more days in the past 30 where they felt sad, blue, or depressed (among all respondents).

Table AA: Worried, Tense, Anxious*

Table BB: Not Enough Rest or Sleep*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI	Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
T . (.)				T 4.1			
Total	400	100/	45 00	Total	400	000/	00 00
Total	133	19%	15 - 22	Total	196	26%	22 - 29
Age Group				Age Group			
18-24	12	22%	10 - 35	18-24	19	34%	19 - 48
25-34	23	22%	13 - 31	25-34	41	38%	28 - 48
35-44	37	25%	17 - 33	35-44	52	32%	24 - 41
45-54	28	19%	12 - 27	45-54	39	21%	15 - 28
55-64	10	10%	3 - 17	55-64	16	11%	5 - 16
65-74	12	13%	6 - 20	65-74	17	22%	12 - 32
75+	11	12%	4 - 19	75+	12	14%	6 - 23
Gender				Gender			
Male	43	18%	13 - 24	Male	64	23%	18 - 29
Female	90	19%	15 - 23	Female	132	28%	23 - 32
	30	19 /0	13 - 23		102	20 /0	20 - 02
Education				Education			
< H.S. Grad	16	23%	12 - 34	< H.S. Grad	23	37%	24 - 51
High School Grad	60	20%	15 - 25	High School Grad	74	24%	19 - 29
Some College	34	16%	10 - 22	Some College	62	23%	18 - 29
College Graduate	23	19%	11 - 27	College Graduate	37	28%	19 - 37
Income				Income			
\$0-\$9,999	11	39%	18 - 60	\$0-\$9,999	11	45%	23 - 66
\$10,000-\$19,999	17	29%	16 - 42	\$10,000-\$19,999	16	18%	9 - 27
\$20,000-\$34,999	36	20%	13 - 27	\$20,000-\$34,999	60	29%	22 - 37
\$35,000-\$49,999	27	19%	12 - 26	\$35,000-\$49,999	35	23%	16 - 31
\$50,000+	19	11%	6 - 17	\$50,000+	48	29%	21 - 37
Marital Status				Marital Status			
Married	73	17%	13 - 20	Married	113	24%	20 - 28
Divorced/Separated	28	30%	19 - 40	Divorced/Separated	37	34%	24 - 44
Widowed	14	18%	8 - 28	Widowed	18	25%	14 - 37
	17	23%	0 - 20 11 - 34		27	32%	19 - 44
Never Mar./Unmar. Couple	17	23 70	11 - 34	Never Mar./Unmar. Couple	21	32 70	19 - 44
Employment				Employment			
Employed for wages	81	22%	17 - 27	Employed for wages	121	29%	24 - 34
Self employed	7	14%	3 - 24	Self employed	14	22%	10 - 34
Not employed	25	22%	12 - 31	Not employed	33	30%	20 - 39
Retired	19	11%	6 - 16	Retired	27	17%	10 - 24
Other				Other			
Limiting pain in the last 30 days	58	33%	25 - 41	Any activity limitation	48	34%	25 - 43
14+ of last 30 days sad	64	84%	74 - 93	Limiting pain in the last 30 days	73	40%	32 - 48
Fair or poor health	34	25%	17 - 34	14+ of last 30 days sad	44	56%	42 - 69
Couldn't see doctor due to cost	30	42%	29 - 55	14+ of last 30 days anxious	62	43%	33 - 52
Diabetes	11	20%	8 - 31	Fair or poor health	46	35%	25 - 44
High blood pressure	46	23%	16 - 30	Diabetes	14	25%	12 - 38
Current smoking	50	30%	22 - 38	High blood pressure	47	22%	16 - 29
Overweight	87	20%	16 - 25	Current smoking	66	36%	28 - 44
High cholesterol	41	21%	15 - 28	Overweight	104	25%	20 - 29
No health insurance	26	43%	28 - 59	High cholesterol	46	23 %	16 - 30
Afraid to leave home at night	7	31%	20 - 59 10 - 51	Afraid to leave home at night	9	39%	18 - 61
Binge drinking	, 18	27%	15 - 38	Know a victim of DV	9 48	59 % 51 %	39 - 62
	10 5	26%		Have a child at home	46 91	34%	39 - 62 28 - 40
Chronic drinking	ິ	20 70	3 - 49	Tiave a cilliu at HUITIE	91	J + 70	20 - 40

^{*}Respondents who reported 14 or more days in the past 30 where they felt worried, tense, or anxious (among all respondents).

^{*}Respondents who reported 14 or more days in the past 30 where they did not get enough rest or sleep (among all respondents).

Table CC: Not Very Healthy and Full of Energy*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	299	39%	35 - 43
	200	00 /0	00 10
Age Group 18-24	19	38%	23 - 54
25-34	38	36%	26 - 46
35-44	69	45%	36 - 53
45-54	58	34%	25 - 42
55-64	36	32%	22 - 42
65-74	36	41%	30 - 53
75+	43	51%	39 - 64
Gender			
Male	84	32%	26 - 39
Female	215	46%	41 - 50
Education			
< H.S. Grad	36	54%	40 - 68
High School Grad	127	40%	34 - 46
Some College	92	38%	31 - 45
College Graduate	44	34%	24 - 43
Income			
\$0-\$9,999	22	82%	67 - 97
\$10,000-\$19,999	39	53%	40 - 66
\$20,000-\$34,999	74	41%	33 - 50
\$35,000-\$49,999	49	34%	25 - 42
\$50,000+	55	32%	24 - 40
Marital Status			
Married	172	36%	32 - 41
Divorced/Separated	44	46%	34 - 57
Widowed	50	54%	42 - 66
Never Mar./Unmar. Couple	32	43%	29 - 56
Employment			
Employed for wages	141	36%	30 - 41
Self employed	21	37%	22 - 51
Not employed	59	47%	37 - 58
Retired	76	43%	35 - 52
Other			
Limiting pain in the last 30 days	127	71%	62 - 79
14+ of last 30 days sad	63	82%	70 - 94
14+ of last 30 days anxious	90	67%	57 - 77
Fair or poor health	90	74%	64 - 83
Couldn't see doctor due to cost	48	64%	51 - 76
Diabetes	30	58%	43 - 74
High blood pressure	104	47%	39 - 54
Current smoking	90	51%	43 - 60
Overweight	170	39%	33 - 44
High cholesterol	84	45%	37 - 53
No health insurance	33	50%	34 - 66

^{*}Respondents who reported 14 or more days in the past 30 where they did not feel healthy and full of energy (among all respondents).

Table DD: Lacked Eating Fruits and Vegetables*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	478	71%	68 - 75
Age Group			
18-24	33	76%	62 - 89
25-34	70	77%	67 - 86
35-44	107	79%	72 - 87
45-54	111	75%	67 - 83
55-64	62	64%	53 - 75
65-74	54	60%	48 - 71
75+	41	58%	45 - 71
Gender			
Male	162	73%	67 - 79
Female	316	70%	65 - 75
Education			
< H.S. Grad	47	73%	60 - 86
High School Grad	194	73%	67 - 78
Some College	151	69%	62 - 75
College Graduate	85	74%	64 - 83
Income \$0-\$9,999	18	61%	38 - 84
\$10,000-\$19,999	46	77%	65 - 89
\$20,000-\$34,999	115	68%	60 - 76
\$35,000-\$49,999	100	74%	66 - 82
\$50,000+	114	75%	67 - 83
Marital Status			
Married	298	61%	56 - 66
Divorced/Separated	70	67%	57 - 78
Widowed	53	51%	40 - 62
Never Mar./Unmar. Couple	52	68%	57 - 80
·		33 / 3	0. 00
Employment Employed for wages	268	65%	59 - 72
Self employed	38	66%	52 - 80
Not employed	74	62%	52 - 72
Retired	96	51%	43 - 59
Other			
Limiting pain in the last 30 days	103	67%	59 - 75
14+ of last 30 days sad	47	68%	55 - 81
14+ of last 30 days anxious	86	75%	66 - 84
Current smokers	128	81%	75 - 88
Diabetes	33	65%	50 - 80
High blood pressure	129	68%	60 - 75
Current smoking	128	81%	75 - 88
Overweight	266	70%	65 - 75
High cholesterol	118	69%	61 - 78
Binge drinking	57	83%	73 - 93
··· ·····- -	٠,	20,0	. 5 55

^{*}Respondents who reported consuming less than 5 servings of fruits and vegetables per day (among all respondents).

Table EE: Chronic Drinking*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	20	4%	2 - 6
Age Group			
18-24	4	11%	0 - 23
25-34	2	3%	0 - 8
35-44	5	4%	0 - 7
45-54	3	2%	0 - 4
55-64	2	3%	0 - 6
65-74	2	3%	8 - 0
75+	2	3%	0 - 8
Gender			
Male	18	8%	4 - 11
Female	2	1%	0 - 1
Education			
< H.S. Grad	3	5%	0 - 10
High School Grad	10	5%	2 - 9
Some College	4	2%	0 - 4
College Graduate	3	3%	0 - 6
Income			
\$0-\$9,999	2	16%	0 - 36
\$10,000-\$19,999	1	1%	0 - 4
\$20,000-\$34,999	4	2%	0 - 4
\$35,000-\$49,999	2	2%	0 - 5
\$50,000+	8	7%	1 - 12
Marital Status			
Married	10	3%	1 - 5
Divorced/Separated	4	6%	0 - 13
Widowed	2	4%	0 - 11
Never Mar./Unmar. Couple	4	8%	0 - 17
Employment			
Employed for wages	13	5%	2 - 7
Self employed	2	4%	0 - 11
Not employed	2	3%	0 - 7
Retired	3	2%	0 - 5
	-		
Other	4	3%	0 6
Limiting pain in the last 30 days 14+ of last 30 days sad	2	3 % 4 %	0 - 6 0 - 9
14+ of last 30 days anxious	5	4 % 6%	1 - 11
Diabetes	2	4%	0 - 11
High blood pressure	5	3%	0 - 6
Current smoking	10	9%	3 - 14
Male use of smokeless tobacco	4	14%	0 - 30
Overweight	14	5%	2 - 7
High cholesterol	4	2%	0 - 5
No health insurance	2	9%	0 - 22
Afraid to leave home at night	1	7%	0 - 21
Know a victim of DV	7	8%	2 - 15
Have hand gun at home	9	7%	2 - 11
Binge drinking	17	25%	13 - 36

^{*}Resondents who reported consuming 60 or more drinks per month (among all respondents).

Table FF: Binge Drinking*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total	7.4	4.40/	40 47
Total	74	14%	10 - 17
Age Group			
18-24	17	40%	24 - 57
25-34	20	23%	13 - 32
35-44	19	16%	9 - 23
45-54	12	9%	4 - 15
55-64	4	5%	0 - 9
65-74	2	3%	0 - 8
Gender			
Male	54	23%	17 - 29
Female	20	6%	3 - 8
Education			
< H.S. Grad	5	9%	1 - 17
High School Grad	35	16%	11 - 22
Some College	25	14%	8 - 19
College Graduate	9	9%	3 - 15
Income			
\$0-\$9,999	3	16%	0 - 35
\$10,000-\$19,999	3	5%	0 - 11
\$20,000-\$34,999	21	14%	8 - 20
\$35,000-\$49,999	14	13%	6 - 20
\$50,000+	26	22%	14 - 31
Marital Status			
Married	32	9%	6 - 12
Divorced/Separated	16	21%	11 - 31
Widowed	1	3%	0 - 9
Never Mar./Unmar. Couple	25	42%	28 - 55
Employment			
Employed for wages	59	20%	15 - 25
Self employed	4	7%	0 - 15
Not employed	9	11%	4 - 19
Retired	2	2%	0 - 5
	_	270	0 0
Other	44	0.0/	0 45
Limiting pain in the last 30 days	11	9%	3 - 15
14+ of last 30 days sad	8 18	13 % 19 %	4 - 22 11 - 28
14+ of last 30 days anxious Diabetes	3	19% 6%	0 - 14
High blood pressure	15	9%	4 - 14
Current smoking	30	9 % 24 %	4 - 14 16 - 32
Male use of smokeless tobacco	13	42%	22 - 62
Overweight	43	13%	9 - 18
High cholesterol	43 6	4%	1 - 8
No health insurance	9	20%	6 - 34
Know a victim of DV	16	21%	11 - 31
Have hand gun at home	25	20%	12 - 27
Chronic drinking	23 17	90%	76 - 100
3+ adults in home	15	24%	13 - 35

^{*}Respondents who reported five or more drinks of alcohol on one or more occasions during the past 30 days (among all respondents).

Table GG: Drinking and Driving*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Tatal			
Total Total	17	3%	1 - 5
	17	3 70	1-3
Age Group	_	4.4.0/	2 27
18-24 25-34	5 1	14 % 1 %	2 - 27 0 - 2
35-44	4	3%	0 - 2
45-54	6	4%	1 - 8
55-64	1	2%	0 - 5
Condor			
Gender Male	15	6%	3 - 9
Female	2	1%	0 - 2
	_	1 70	0 - 2
Education	0	4.0/	0 0
< H.S. Grad	2 7	4 % 4 %	0 - 9 1 - 7
High School Grad	7 7	4 % 3 %	0 - 6
Some College College Graduate	1	3 % 1 %	0 - 6
	1	1 /0	0 - 4
Income		-0/	
\$0-\$9,999	1	7%	0 - 22
\$10,000-\$19,999	1	1%	0 - 4
\$20,000-\$34,999	5	3%	0 - 5
\$35,000-\$49,999	4	4% 5%	0 - 8
\$50,000+	5	5%	0 - 10
Marital Status			
Married	5	1%	0 - 2
Divorced/Separated	2	3%	0 - 6
Widowed	1	3%	0 - 9
Never Mar./Unmar. Couple	9	16%	5 - 27
Employment			
Employed for wages	12	4%	1 - 7
Self employed	2	5%	0 - 11
Not employed	3	5%	0 - 11
Other			
14+ of last 30 days sad	2	4%	0 - 10
14+ of last 30 days anxious	3	3%	0 - 6
Diabetes	1	3%	0 - 10
High blood pressure	4	2%	0 - 5
Current smoking	9	6%	2 - 11
Male use of smokeless tobacco	5	17%	0 - 33
Overweight	11	3%	1 - 5
Afraid to leave home at night	1	7% 7%	0 - 20
Know a victim of DV	6 17	7%	1 - 13
Binge drinking Chronic drinking	17 5	25 % 21 %	13 - 37
Chronic drinking 3+ adults in home	5 5	21% 8%	1 - 41 1 - 16
3 · dddio iii ffoliic		U /0	1 - 10

^{*}Respondents who reported that they had driven when they'd had perhaps too much to drink in the past month (among all respondents).

Table HH: Handgun In or Around the House*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	154	21%	18 - 24
Age Group			
18-24	6	12%	2 - 22
25-34	24	24%	16 - 33
35-44	33	24%	16 - 31
45-54	40	26%	18 - 33
55-64	29	29%	20 - 39
65-74	13	14%	7 - 21
75+	9	11%	4 - 18
Gender			
Male	72	29%	23 - 35
Female	82	17%	14 - 21
Education			
< H.S. Grad	12	18%	8 - 27
High School Grad	60	20%	16 - 25
Some College	45	20%	14 - 25
College Graduate	37	30%	22 - 39
	O1	00 70	22 00
Income	•	0.07	0 45
\$0-\$9,999	2	6%	0 - 15
\$10,000-\$19,999	7	11%	3 - 18
\$20,000-\$34,999	33	18%	12 - 24
\$35,000-\$49,999	49	34%	26 - 42
\$50,000+	50	33%	25 - 41
Marital Status			
Married	124	28%	24 - 32
Divorced/Separated	15	15%	8 - 23
Widowed	5	6%	1 - 10
Never Mar./Unmar. Couple	9	11%	4 - 18
Employment			
Employed for wages	88	23%	19 - 28
Self employed	16	27%	15 - 39
Not employed	22	20%	13 - 28
Retired	28	16%	11 - 22
Other			
14+ of last 30 days sad	15	21%	11 - 30
14+ of last 30 days anxious	26	21%	13 - 28
Diabetes	11	19%	8 - 30
High blood pressure	43	21%	15 - 26
Male use of smokeless tobacco	11	38%	18 - 59
Overweight	91	22%	18 - 27
High cholesterol	44	25%	19 - 32
Know a victim of DV	34	38%	27 - 49
Have long gun at home	139	50%	44 - 56
Binge drinking	25	36%	24 - 48
Chronic drinking	9	47%	23 - 72
No rules about media content	16	23%	12 - 33

^{*}Resondents who reported keeping a handgun (such as a pistol or revolver) in or around the home including in garage, storage area, or motor vehicle (among all respondents using household weight).

Table II: Long Gun In or Around the House*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	279	39%	35 - 43
Age Group			
18-24	21	43%	28 - 58
25-34	30	31%	21 - 40
35-44	63	45%	37 - 54
45-54	79	52%	44 - 60
55-64	43	43 % 26 %	33 - 53 17 - 35
65-74 75+	23 20	26 % 24 %	17 - 35
	20	24 %	15 - 34
Gender	40=	=00/	
Male	125	52%	46 - 59
Female	154	33%	28 - 37
Education			
< H.S. Grad	15	22%	12 - 32
High School Grad	114	38%	33 - 44
Some College	96	43%	36 - 49
College Graduate	54	46%	37 - 55
Income			
\$0-\$9,999	3	9%	0 - 20
\$10,000-\$19,999	15	22%	12 - 32
\$20,000-\$34,999	66	37%	30 - 44
\$35,000-\$49,999	79	56%	47 - 64
\$50,000+	85	56%	48 - 64
Marital Status			
Married	217	49%	45 - 54
Divorced/Separated	25	26%	17 - 35
Widowed	14	15%	8 - 23
Never Mar./Unmar. Couple	21	26%	16 - 36
Employment			
Employed for wages	169	45%	40 - 50
Self employed	28	51%	37 - 65
Not employed	37	34 %	25 - 43
Retired	45	27%	20 - 33
Other			
14+ of last 30 days sad	22	30%	20 - 41
14+ of last 30 days anxious	41	33%	24 - 41
Diabetes	17	31%	18 - 44
High blood pressure	76	36%	29 - 43
Male use of smokeless tobacco	18	60%	39 - 80
Overweight	167	42%	37 - 47
High cholesterol	72	41%	34 - 49
Know a victim of DV	46	49%	38 - 60
Have hand gun at home	139	91%	86 - 95
Binge drinking	37	53%	40 - 65
No rules about media content	38	58%	45 - 71

^{*}Resondents who reported keeping a long gun (such as a rifle or shotgun) in or around the home including in garage, storage area, or motor vehicle (among all respondents using household weight).

Table JJ: Loaded and Unlocked Firearm in House*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total		-0/	
Total	35	5%	3 - 7
Age Group			
18-24	1	2%	0 - 7
25-34	8	8%	3 - 14
35-44	5	4%	0 - 7
45-54	9	6%	2 - 10
55-64	8	9%	3 - 15
65-74	2	2%	0 - 5
75+	2	2%	0 - 6
Gender			
Male	22	10%	6 - 13
Female	13	3%	1 - 4
Education			
< H.S. Grad	2	3%	0 - 7
High School Grad	15	5 %	3 - 8
Some College	9	4%	2 - 7
College Graduate	9	4 % 8 %	3 - 13
College Graduate	9	0 %	3 - 13
Income			
\$0-\$9,999	1	3%	0 - 9
\$10,000-\$19,999	3	4%	0 - 10
\$20,000-\$34,999	5	3%	0 - 5
\$35,000-\$49,999	12	9%	4 - 13
\$50,000+	13	9%	4 - 14
Marital Status			
Married	19	5%	3 - 7
Divorced/Separated	9	9%	3 - 15
Widowed	2	2%	0 - 5
Never Mar./Unmar. Couple	4	6%	0 - 11
Employment			
Employed for wages	22	6%	4 - 9
Self employed	5	10%	1 - 18
Not employed	3	3%	0 - 6
Retired	5	3%	0 - 6
	3	3 /0	0-0
Other	_		
14+ of last 30 days sad	7	10%	3 - 17
14+ of last 30 days anxious	9	7%	3 - 12
Diabetes	2	4%	0 - 10
High blood pressure	6	3%	1 - 5
Current smoking	15	9%	4 - 13
Overweight	22	6%	3 - 8
High cholesterol	9	5%	2 - 9
Know a victim of DV	10	11%	4 - 17
Have hand gun at home	26	18%	12 - 24
Have long gun at home	34	13%	9 - 17
Binge drinking	8	12%	4 - 20
Chronic drinking	3	16%	0 - 34

^{*}Respondents who reported keeing a firearm in or around the home that is both loaded and unlocked (among all respondents using household weight).

Table KK: Carried a Firearm for Protection*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	8	1%	0 - 2
Age Group			
25-34	2	3%	0 - 6
35-44	2	1%	0 - 3
45-54	2	2%	0 - 5
55-64	1	1%	0 - 3
65-74	1	1%	0 - 4
Gender			
Male	5	2%	0 - 3
Female	3	1%	0 - 2
Education			
< H.S. Grad	1	1%	0 - 4
High School Grad	2	1%	0 - 2
Some College	1	1%	0 - 2
College Graduate	4	4%	0 - 7
Income			
\$0-\$9,999	1	5%	0 - 14
\$20,000-\$34,999	3	2%	0 - 4
\$35,000-\$49,999	1	1%	0 - 2
\$50,000+	3	2%	0 - 5
Marital Status			
Married	5	1%	0 - 2
Divorced/Separated	2	3%	0 - 7
Widowed	1	1%	0 - 4
Employment			
Employed for wages	6	2%	0 - 3
Self employed	1	1%	0 - 4
Not employed	1	1%	0 - 3
Other			
14+ of last 30 days sad	3	5%	0 - 10
14+ of last 30 days anxious	3	2%	0 - 5
Fair or poor health	3	3%	0 - 6
Diabetes	1	2%	0 - 7
High blood pressure	1	1%	0 - 2
Overweight	7	2%	0 - 3
High cholesterol	2	1%	0 - 3
No health insurance	2	3%	0 - 7
Afraid to leave home at night	2	8%	0 - 19
Know a victim of DV	3	4%	0 - 8
Have hand gun at home	8	5%	2 - 9
Chronic drinking	1	6%	0 - 20

^{*}Respondents who reported carrying a loaded firearm outside of the home for protection during the last month (among all respondents).

Table LL: Confronted Someone With a Firearm*

Number at Risk	% Subpop. at Risk	95% CI
2	0%	0 - 1
2	2%	0 - 6
2	1%	0 - 2
1	1%	0 - 2
1	1%	0 - 2
1	0%	0 - 1
1	1%	0 - 3
1	0%	0 - 1
1	1%	0 - 4
2	1%	0 - 2
1	1%	0 - 4
1		0 - 2
1	0%	0 - 1
2	1%	0 - 2
1	2%	0 - 5
2	2%	0 - 4
2	3%	0 - 7
1	6%	0 - 20
	2 2 2 1 1 1 1 2 1 1 2 2 2 2	at Risk at Risk 2 0% 2 2% 2 1% 1 1% 1 0% 1 1% 1 0% 1 1% 1 0% 1 1% 2 1% 1 1% 2 1% 1 2% 2 2% 2 3%

^{*}Respondents who reported confronting another person with a firearm (even if they did not fire it), to protect themselves, their property, or someone else in the last 12 months (among all respondents).

Table MM: In a Car with a Gun*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	21	3%	2 - 4
Age Group			
18-24	1	2%	0 - 7
25-34	4	5%	0 - 9
35-44	7	5%	1 - 9
45-54	5	3%	0 - 6
55-64	2	1%	0 - 4
65-74	2	2%	0 - 4
Gender			
Male	9	3%	1 - 6
Female	12	3%	1 - 4
Education			
< H.S. Grad	2	2%	0 - 6
High School Grad	7	2%	0 - 4
Some College	4	2%	0 - 4
College Graduate	8	7%	2 - 12
Income			
\$0-\$9,999	1	5%	0 - 14
\$10,000-\$19,999	1	2%	0 - 5
\$20,000-\$34,999	5	2%	0 - 4
\$35,000-\$49,999	9	6%	2 - 11
\$50,000+	3	1%	0 - 3
Marital Status			
Married	13	3%	1 - 4
Divorced/Separated	3	4%	0 - 9
Widowed	2	2%	0 - 5
Never Mar./Unmar. Couple	3	4%	0 - 9
Employment			
Employed for wages	18	5%	2 - 7
Self employed	1	1%	0 - 4
Not employed	2	2%	0 - 4
Other			
14+ of last 30 days sad	3	5%	0 - 10
14+ of last 30 days anxious	6	4%	1 - 8
Fair or poor health	4	4%	0 - 9
Couldn't see doctor due to cost	3	5%	0 - 11
Diabetes	4	6%	0 - 12
High blood pressure	2	1%	0 - 3
Current smoking	- 11	7%	2 - 11
Overweight	12	3%	1 - 5
High cholesterol	6	4%	0 - 7
Afraid to leave home at night	2	8%	0 - 19
Know a victim of DV	7	6%	2 - 11
Have hand gun at home	17	9%	4 - 13
Have long gun at home	18	6%	3 - 9

^{*}Respondents who reported that in the last 30 days they had driven with or been a passenger in a motor vehicle in which they knew there was a loaded firearm (among all respondents).

Table NN: Afraid to Leave Home At Night*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	31	4%	2 - 5
Age Group			
18-24	2	4%	0 - 10
25-34	2	2%	0 - 4
35-44	9	6%	2 - 9
45-54	3	1%	0 - 3
55-64	2	2%	0 - 5
65-74	9	7%	2 - 12
75+	4	4%	0 - 8
Gender			
Male	3	1%	0 - 3
Female	28	6%	4 - 8
Education			
< H.S. Grad	10	14%	5 - 23
High School Grad	12	3%	1 - 5
Some College	5	1%	0 - 3
College Graduate	4	3%	0 - 7
Income			
\$0-\$9,999	4	17%	0 - 35
\$10,000-\$19,999	4	5%	0 - 9
\$20,000-\$34,999	8	3%	1 - 6
\$35,000-\$49,999	2	1%	0 - 3
\$50,000+	3	2%	0 - 4
Marital Status			
Married	19	4%	2 - 5
Divorced/Separated	3	3%	0 - 7
Widowed	7	8%	1 - 15
Never Mar./Unmar. Couple	2	1%	0 - 4
Employment			
Employed for wages	11	3%	1 - 4
Self employed	2	3%	0 - 8
Not employed	8	6%	2 - 11
Retired	10	5%	2 - 7
Other			
14+ of last 30 days sad	5	7%	0 - 14
14+ of last 30 days anxious	7	6%	1 - 10
Fair or poor health	8	6%	2 - 10
Couldn't see doctor due to cost	9	14%	5 - 23
Diabetes	7	13%	3 - 23
High blood pressure	14	5%	2 - 8
Current smoking	11	6%	2 - 10
Overweight	17	4%	2 - 6
Know a victim of DV	10	9%	3 - 15
Unsafe neighborhood	14	5%	2 - 8
*Respondents who reported being			

^{*}Respondents who reported being very or somewhat afraid to leave their home at night (among all respondents).

Table OO: Known a Victim of Domestic Violence

102		
	14 %	11 - 17
0	1170	
	20%	7 - 32
9 19	20 %	11 - 29
29	20 %	13 - 27
26	14%	8 - 19
10	9%	3 - 14
6	6%	1 - 11
3	5%	0 - 11
36	12%	8 - 17
66	15%	12 - 19
11	18%	7 - 29
30	11%	7 - 14
41	18%	12 - 23
20	14%	8 - 21
11	47%	26 - 68
12	20%	9 - 30
22	11%	6 - 16
20	13%	7 - 19
30	19%	12 - 26
	.0 /0	
64	13%	10 - 17
18	19%	11 - 28
4	6%	0 - 13
		8 - 30
10	10 70	0 00
60	100/	13 - 22
		5 - 25
		8 - 23
		1 - 7
•	1 70	
15	170/	0 06
		8 - 26 11 - 26
		16 - 39
		7 - 17
		18 - 32
		5 - 34
		11 - 19
		6 - 16
19		17 - 45
10		16 - 56
34	23%	15 - 30
16	21%	11 - 31
	30%	7 - 52
	15 68 9 17 7 15 27 18 26 43 8 59 23 19 10 34	15 19% 68 18% 9 15% 17 15% 7 4% 15 17% 27 19% 18 27% 26 12% 43 25% 8 19% 59 15% 23 11% 19 31% 10 36% 34 23% 16 21%

^{*}Respondents reporting knowing or seeing someone who was beaten or otherwise hurt by a husband, wife, boyfriend, or girlfriend during the past year (among all respondents).

Table PP: Lacked Influenza Vaccination*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	473	63%	59 - 68
Age Group			
18-24	43	87%	76 - 97
25-34	79	71%	54 - 87
35-44 45-54	115 117	76% 76%	69 - 84
45-54 55-64	68	76 % 65 %	70 - 83 55 - 75
65-74	31	32%	21 - 42
75+	20	19%	11 - 28
Gender			
Male	170	63%	56 - 71
Female	303	64%	59 - 68
Education			
< H.S. Grad	44	53%	34 - 73
High School Grad	196	65%	59 - 71
Some College	153	66%	59 - 73
College Graduate	77	60%	50 - 70
Income	4-	53 0/	07 70
\$0-\$9,999	17	57 %	37 - 76
\$10,000-\$19,999	43	59 % 62 %	47 - 72
\$20,000-\$34,999 \$35,000-\$49,999	123 95	62 % 65 %	52 - 73 56 - 73
\$50,000+	120	77%	70 - 84
Marital Status			
Married	309	64%	58 - 69
Divorced/Separated	72	75%	66 - 84
Widowed	36	35%	25 - 46
Never Mar./Unmar. Couple	53	73%	62 - 84
Employment			
Employed for wages	282	73%	66 - 79
Self employed	47	79%	67 - 91
Not employed Retired	79 62	70 % 31 %	61 - 79 24 - 38
	02	J1 /0	24 - 30
Other 14+ of last 30 days sad	48	65%	53 - 77
14+ of last 30 days sau 14+ of last 30 days anxious	86	71%	63 - 79
Couldn't see doctor due to cost	58	78%	68 - 88
Diabetes	26	39%	20 - 59
High blood pressure	117	51%	42 - 60
Overweight	249	59%	53 - 65
High cholesterol	89	50%	42 - 58
No health insurance	56	89%	80 - 98
*Respondents who had not receive	ed a vaccine	e to prevent in	fluenza

^{*}Respondents who had not received a vaccine to prevent influenza in the last 12 months (among all respondents).

Table QQ: Lacked Influenza Vaccination Ages 65 and Older*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total	F.4	000/	40 00
Total	51	26%	19 - 33
Age Group			
65-74	31	32%	21 - 42
75+	20	19%	11 - 28
Gender			
Male	8	17%	6 - 29
Female	43	32%	24 - 41
Education			
< H.S. Grad	8	26%	8 - 43
High School Grad	25	26%	17 - 36
Some College	16	34%	18 - 50
College Graduate	2	8%	0 - 23
Income			
\$0-\$9,999	4	26%	0 - 53
\$10,000-\$19,999	14	37%	19 - 55
\$20,000-\$34,999	15	30%	16 - 44
\$35,000-\$49,999	4	21%	0 - 43
\$50,000+	2	24%	0 - 66
Marital Status			
Married	22	24%	15 - 34
Divorced/Separated	6	46%	15 - 78
Widowed	21	27%	16 - 38
Never Mar./Unmar. Couple	2	24%	0 - 62
Employment			
Employed for wages	4	46%	3 - 89
Self employed	2	28%	0 - 77
Not employed	3	19%	0 - 40
Retired	42	26%	18 - 34
Other			
14+ of last 30 days sad	5	25%	4 - 46
14+ of last 30 days anxious	5	29%	6 - 52
Couldn't see doctor due to cost	3	36%	0 - 74
Diabetes	7	24%	7 - 42
High blood pressure	24	24%	15 - 33
Current smoking	7	63%	32 - 94
Overweight	24	20%	12 - 28
High cholesterol	15	24%	12 - 35

^{*}Respondents who had not received a vaccine to prevent influenza in the last 12 months (among respondents 65 and older).

Table RR: Lacked Pneumonia Vaccination*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total Total	556	74%	70 - 79
Age Group			
18-24	42	93%	84 - 100
25-34	93	82%	64 - 100
35-44	137	92%	86 - 97
45-54	136	84%	76 - 91
55-64	79	76%	67 - 85
65-74	38	40%	29 - 51
75+	31	33%	22 - 44
Gender			
Male	196	73%	65 - 81
Female	360	75%	71 - 79
Education			
< H.S. Grad	51	59%	38 - 80
High School Grad	216	72%	66 - 77
Some College	187	80%	74 - 86
College Graduate	99	79%	70 - 87
Income			
\$0-\$9,999	22	71%	54 - 89
\$10,000-\$19,999	42	59%	46 - 72
\$20,000-\$34,999	139	67%	56 - 79
\$35,000-\$49,999	115	78%	70 - 86
\$50,000+	141	92%	88 - 97
Marital Status			
Married	357	74%	68 - 80
Divorced/Separated	87	88%	81 - 96
Widowed	43	44%	33 - 55
Never Mar./Unmar. Couple	64	86%	77 - 95
Employment			
Employed for wages	340	87%	80 - 93
Self employed	49	88%	79 - 97
Not employed	93	78%	69 - 87
Retired	72	37%	30 - 45
Other			
14+ of last 30 days sad	50	63%	49 - 76
14+ of last 30 days anxious	95	73%	64 - 82
Couldn't see doctor due to cost	59	81%	72 - 91
Diabetes	27	40%	20 - 61
High blood pressure	132	56%	47 - 65
Overweight	298	71%	65 - 77
High cholesterol	108	57%	49 - 65
No health insurance	54	84%	72 - 97

^{*}Respondents who had never received a vaccine to prevent pneumococcal disease (among all respondents).

Table SS: Lacked Pneumonia Vaccination Ages 65 and Older

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	69	37%	29 - 45
Age Group			
65-74	38	40%	29 - 51
75+	31	33%	22 - 44
Gender			
Male	15	32%	18 - 46
Female	54	40%	31 - 49
Education			
< H.S. Grad	13	40%	20 - 60
High School Grad	35	37%	26 - 48
Some College	18	40%	24 - 57
College Graduate	3	21%	0 - 48
Income			
\$0-\$9,999	8	50%	19 - 81
\$10,000-\$19,999	13	35%	17 - 53
\$20,000-\$34,999	22	40%	24 - 55
\$35,000-\$49,999	6	36%	8 - 64
\$50,000+	4	60%	8 - 100
Marital Status			
Married	31	36%	25 - 47
Divorced/Separated	9	64%	36 - 92
Widowed	26	34%	22 - 46
Never Mar./Unmar. Couple	3	33%	0 - 75
Employment			
Employed for wages	5	73%	35 - 100
Self employed	4	69%	15 - 100
Not employed	8	45%	18 - 72
Retired	52	33%	25 - 41
Other			
14+ of last 30 days sad	7	29%	7 - 50
14+ of last 30 days anxious	8	34 %	12 - 57
Diabetes	7	24%	7 - 42
High blood pressure	31	33%	22 - 43
Current smoking	7	66%	36 - 96
Overweight	33	29%	19 - 38
High cholesterol	21	31%	18 - 43

^{*}Respondents who had never received a vaccine to prevent pneumococcal disease (among respondents 65 and older).

Table TT: More Than Two Hours of Television*

	Number	% Subpop.	
Subpopulation	at Risk	at Risk	95% CI
Total			
Total	121	51%	44 - 58
Age Group of Oldest Child			
1-4	19	54%	37 - 72
5-9	21	46%	31 - 61
10-15	44	52%	42 - 63
16-17	37	50%	38 - 62
Education of Adult Respond			
< H.S. Grad	5	34%	4 - 63
High School Grad	45	53%	42 - 64
Some College	43	52%	40 - 64
College Graduate	27	48%	33 - 64
Income of Household			
\$0-\$9,999	3	29%	0 - 66
\$10,000-\$19,999	4	44%	2 - 86
\$20,000-\$34,999	32	53%	39 - 67
\$35,000-\$49,999	32	55%	41 - 68
\$50,000+	36	52%	39 - 65
Marital Status of Adult Response	ondent		
Married	95	52%	44 - 60
Divorced/Separated	17	51%	31 - 71
Widowed	2	50%	0 - 100
Never Mar./Unmar. Couple	6	36%	9 - 63
Other **			
No TV Hours Rules	52	56%	45 - 67
Media Content Rules	35	53%	40 - 67
Any day unsupervised	58	51%	41 - 61
>1 Household	22	51%	34 - 69
No Bedtime Rules	88	49%	41 - 57
*D			

^{*}Respondents who reported that the oldest child in their household under age 18 watched more than two hours of television on the previous day (among children ages one to 17, weighted to children ages one to 17).

TV Hours Rules: Respondents reporting no rules about number of hours of TV per day for oldest child

Media Content Rules: Respondent reporting no rules about program/movie content or no rules about video game content for oldest child

Any day unsupervised: Respondents reporting oldest child unsupervised after school one or more days per week

>1 Household: Respondents reporting that oldest child splits time between separate households

No Bedtime Rules: Respondents reporting absence of rules about bedtime on school nights for oldest child

^{**}Other

Table UU: No Rules About Media Content*

Subpopulation	Number at Risk	% Subpop. at Risk	95% CI
Total			
Total	69	26%	20 - 32
Age Group of Oldest Child			
5-9	5	9%	1 - 18
10-15	24	26%	17 - 36
16-17	40	49%	38 - 61
Education of Adult Respond.			
< H.S. Grad	4	26%	0 - 53
High School Grad	26	28%	18 - 38
Some College	21	21%	12 - 31
College Graduate	18	32%	18 - 46
Income of Household			
\$0-\$9,999	1	13%	0 - 48
\$10,000-\$19,999	5	48%	10 - 87
\$20,000-\$34,999	14	26%	13 - 39
\$35,000-\$49,999	16	25%	12 - 37
\$50,000+	25	29%	18 - 40
Marital Status of Adult Respo	ndent		
Married	56	28%	21 - 35
Divorced/Separated	8	21%	7 - 36
Widowed	2	50%	0 - 100
Never Mar./Unmar. Couple	2	13%	0 - 34
Other **			
No TV Hours Rules	46	45%	34 - 55
Any day unsupervised	38	26%	18 - 34
>1 Household	10	21%	8 - 34
No Bedtime Rules	51	23%	17 - 29
2+ Hours of TV	35	29%	20 - 38

^{*}Respondents who reported no rules about program/movie content or no rules about video game content for oldest child (among children ages one to 17, weighted to children ages one to 17).

TV Hours Rules: Respondents reporting no rules about number of hours of TV per day for oldest child

Any day unsupervised: Respondents reporting oldest child unsupervised after school one or more days per week

2+ Hours of TV: Respondents reporting that oldest child spent two or more hours watching television on previous day

>1 Household: Respondents reporting that oldest child splits time between separate households

No Bedtime Rules: Respondents reporting absence of rules about bedtime on school nights for oldest child

^{**}Other:

TECHNICAL NOTES

Methodology

Background

The Behavior Risk Survey of Sumner County was conducted at the request of the Sumner Community Health Organization. This survey was based on methodology and survey content used by the Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS is a national data collection system, coordinated by the Centers for Disease Control and Prevention, designed to enable public health professionals to assess health risk factors known to contribute to or increase the risk of chronic and communicable disease, acute illness, injury, disability, and premature death. Kansas has conducted the statewide BRFSS every year since 1992.

Sampling

The telephone survey was conducted using a simple random digit dialing sampling method. Sampling was conducted by a commercial sample provider utilizing simple random digit dial (RDD) methods from one-plus blocks only (i.e., from blocks of one hundred telephone numbers in which there was at least one listed household). Using this six digit number (area code and prefix), the Health Risk Studies Program within the Bureau of Health Promotion generated a random sample of all telephone exchanges in the four county area. The six digits were then assigned all possible four digit suffixes, from which a randomly selected sample was obtained for use in the survey. Pre-screening of the sample was conducted to eliminate businesses, institutions, and non-working numbers. Potential working telephone numbers were dialed during three separate calling periods (daytime, evening, and weekends) for a total of 15 call attempts before being replaced. Upon reaching a valid residential number, one household member aged 18 or older was randomly selected. This selection process cross-referenced the last digit in the telephone number with the number of adults in the household to eliminate potential over-sampling and bias in the sample. If the selected respondent was not available, an appointment was made to call at a later date. If the selected respondent could not be reached during the survey calling period or refused to participate, that telephone number was replaced with another randomly selected number.

Because households were selected by random telephone number and no identifying information was solicited, all responses to this survey were anonymous. Between March 2000 and July 2000, 762 residents of Sumner County were interviewed.

Data Collection

Residents of Sumner County were interviewed by telephone using a standardized questionnaire prepared from BRFSS modules used by the Centers for Disease Control and Prevention (CDC) or developed specifically to meet the information needs of Sumner County. The survey consisted, in part, of core modules used in all the counties participating in local BRFSS survey. Topics covered by the core modules were health status, health care access, hypertension awareness, cholesterol awareness, diabetes, exercise, seat belt use, tobacco use, smokeless tobacco use, demographics, breast and cervical cancer screening, adult immunization, HIV/AIDS, and quality of life. Additional questions were selected from optional modules available from CDC or previously used in the Kansas BRFSS. These modules were parenting, health care coverage, preventive counseling, fruits and vegetables, alcohol consumption, firearms, and violence and crime.

Weighting Procedure

Weighting is a process by which the survey data are adjusted to account for unequal selection probability and more accurately represent the population from which the sample was drawn. The weighting process for the survey data used the same formula which is used nationwide in the BRFSS. The responses of each person interviewed were assigned a weight which accounted for the number of telephone numbers in the household, the number of adults in the household, and the demographic distribution of the sample. By weighting the data, the responses were adjusted to compensate for the over-representation or under-representation of particular subgroups. Alterations in the weighting formulas were made to arrive at estimates for prevalence in a household and among children in specific age groups. The following tables present a description of the sample before and after weighting of the data and compares age and sex breakdown to census estimates.

Demographic Characteristic	Unweighted Sample (%)	Weighted Sample (%)	Census Estimate (%)
Age			
18-24	6.6	10.2	9.6
25-34	13.7	16.9	15.4
35-44	20.2	21.5	21.6
45-54	20.8	16.1	18.6
55-64	13.8	12.1	12.9
65+	24.8	23.3	22.0
Sex			
Male	34.8	47.6	47.9
Female	65.2	52.4	52.1

Demographic Characteristics	Unweighted Sample (%)	Weighted Sample (%)
Education		
<hs graduate<="" td=""><td>10.4</td><td>11.8</td></hs>	10.4	11.8
HS Diploma	41.9	42.3
Some College	31.2	30.6
College Graduate	16.5	15.2
Income		
\$0 - \$9,999	5.6	4.2
\$10,000 - \$19,999	12.5	9.6
\$20,000 - \$34,999	31.3	33.5
\$35,000 - \$49,999	24.1	24.7
\$50,000+	26.5	28.0

Demographic Characteristics	Unweighted Sample (%)	Weighted Sample (%)
Employment		
Employed for Wages	52.2	54.5
Self-Employed	7.6	7.8
Not Employed for Wages	15.8	15.1
Retired	24.4	22.6
Marital Status		
Married	62.9	70.5
Divorced/Separated	13.2	9.0
Widowed	13.1	8.3
Never Married/Unmarried Couple	10.7	12.2

Data Analysis

The charts and tables of the various risk factors presented in this document are broken down by age, gender, education level, income level, employment status, marital status, county, and various other factors likely to be associated with each specific risk factor. In the calculation of the percentage of the population at risk for specific health behaviors, respondents who indicated "don't know" or "refused" were not included. This causes some variation in sample size from question to question. When the results are generalized to the population, an assumption was made that the proportion of respondents at risk was the same for those with missing or unknown information as for those who provided adequate information. The percentage of missing or unknown responses was small for all questions except income for which 20% of responses were missing or unknown.

Data Reliability

Telephone interviewing has been demonstrated to be a reliable method for collecting behavioral risk data and can cost three to four times less than other interviewing methods such as mail-in interviews or face-to-face interviews. The BRFSS methodology has been utilized and evaluated by the CDC and other participating states since 1984. Content of survey questions, questionnaire design, data collection procedures, surveying techniques, and editing procedures have been thoroughly evaluated to maintain overall data quality and to lessen the potential for bias within the population sample.

Stratification of Data in Analysis

The complete demographic breakdown for selected risk factors can be found in the detailed tables section of this document. In the profile chapters of the ten selected health issues, cell sizes were adjusted to above 20 individuals whenever possible. Smaller cell sizes were allowed in the risk tables in the appendices but the number of respondents at risk is included to permit judgement about the stability of the proportion. Cell sizes smaller than 50 can provide unstable results, and cell sizes below 20 should be considered highly unstable (i.e., subject to fluctuation depending on the sample drawn.) The risk tables include a confidence interval for each percentage estimate. This represents a statistical test which should be used to assess the reliability of the estimate. This is discussed further in the introduction to those tables.

The education categories are comprised of those with less than a high school diploma, high school graduate, some college (i.e. technical or vocational school and partial college education with less than a four year degree), and college graduate (those who have a 4 year college degree and/or a postgraduate degree). Annual household income categories are \$0-\$19,999, \$20,000-\$34,999, \$35,000-\$49,999,

\$50,000+. The employment status category is comprised of people who are employed for wages, self-employed, retired, and those who are not employed (those out of work, homemakers, students, and those unable to work). Marital status is comprised of married, divorced or separated, widowed, and never married or unmarried couples.

Limitations

Sampling

The BRFSS survey samples the population using a technique which is discussed in the methodology section. Sampling yields results which are an estimate of the true answer for the entire population. The more persons that are interviewed, the greater the precision of the estimate. When the data are subdivided to look at sub-populations (e.g., an age subgroup) these estimates will be less precise; if the number of persons interviewed was small because the subgroup represents a small fraction of the population (e.g., diabetics less than 30 years old), the estimate may become too uncertain to be of value.

Because the survey is conducted by telephone, persons without telephones could not be reached. Since phone ownership is highly correlated to income, persons without a phone are more likely to be poor than persons with a telephone. This will potentially affect questions with responses that are highly dependent on income (e.g., health insurance) more than other questions. However, because phone ownership is high in Kansas (greater than 95%), it is unlikely that failing to reach these persons will substantially alter results.

Questionnaire Design and Administration

How a question is written and which questions preceded it in the questionnaire can influence responses in unpredictable ways. Not all the questions used in the survey have been tested to ensure that all persons understand the intended meaning. Those that come from modules created by the Centers for Disease Control and Prevention usually have been tested, while those in state modules may or may not have been tested, depending on the source of the question. Furthermore, not all questions are equally easy for respondents to answer. While it may be easy for a respondent to provide a personal opinion, it may be much harder to recall a past event (last mammogram) or provide factual information (household income).

Interviewers are trained and monitored to ensure that they administer the survey in a neutral voice and read the written question verbatim and without comment. Nonetheless, it is possible for the interviewer to bias the results through tone of voice or administration technique. Coding errors may also occur if the interviewer types in the wrong response to the question. In addition, the person being interviewed may alter his or her response to give the interviewer the most socially acceptable answer. This may be a problem especially for questions which may have a perceived stigma (e.g., HIV risk).

Response Rate

The upper bound response rate for the Sumner survey was 56%. The upper bound formula* is based on the number of eligible households reached and the number of interviews completed. However, in addition to those persons who refused to answer questions, lack of response can also arise because household members were not available despite repeated call attempts, or household members refuse to pick up the phone based on what they discern from caller ID. The bias from non-response cannot be removed; it is not possible to know if those who refused to respond would have answered the questions in approximately the same ways as those who responded.

Confounding and Causation

Relationships between risk factors and personal characteristics which are presented in this document are univariate (i.e., examine each risk factor in relationship to only one characteristic at a time); however, the complexity of health associations are not fully represented by examining single relationships. For example, an examination of heart disease and employment status might show a greater prevalence of heart disease among persons who are retired than among persons who are employed. However, persons who are retired are expected to have a greater average age than persons who are employed; consequently, this relationship might entirely disappear if we removed the effects of age. (If this were the case we would say that the relationship between heart disease and employment status was being confounded by age.)

Likewise, this document does not attempt to explain the causes of the health effects examined. For instance, BRFSS data might show a higher prevalence of heart disease among smokers, but one should not conclude from this that smoking causes heart disease. That smoking is indeed a causal factor for heart disease is apparent from a large body of scientific data, but that is not a conclusion that can be drawn from a cross-sectional survey such as this. Rather this is a "snapshot" of disease, risk factors, and population characteristics for adult residents of Sumner County at a point in time.

^{*} Upper bound response = number of complete interviews / (completes + refusals + terminations)